

Dr.BAMUP 227/07-07/50,000

**Dr. Babasaheb Ambedkar Marathwada University,**  
**APPLICATION FOR STATEMENT OF MARK MEMO/TRANSCRIPT CERTIFICATE**

(To be submitted between 10.30 am and 2p.m. on working days if the fees are being paid at the Counter. Marks Memo will not be issued the candidate pays the required fees and submit this application in all details.)

To,  
The Registrar,  
Dr. Babasaheb Ambedkar Marathwada University,  
Aurangabad. 431 004.

Sir,

I beg to request you to supply me with Statement of my Marks memo in each head of Passing/failing at the ----- examination held in the month of-----200 .

I submit below full particulars as required:-

Name in full (beginning with surname)-----

Seat No. ----- Centre -----

Address (to which the candidate's marks memo may be sent) -----

I remit herewith Rs.30/- (Non-Professional) Rs.50/-(Professional) being the fees prescribed in this behalf.

Yours faithfully,

(Applicant Signature)

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*(To be filled by the Office)*

Received Rs.30/50 Vide Receipt ----- dated-----

**Cashier**

Statement of marks issued No ----- dated-----

**Cleark-in-charge**