GOVERNMENT OF GOA



DIRECTORATE OF TECHNICAL EDUCATION

PORVORIM - GOA

FORM - A

APPICATION FORM FOR AUTHENTICATION OF ORIGINAL EDUCATIONAL QUALIFICATION

| | | 1 | This form should be filled in Capital Letters only. | AFFIX PASSPORT SIZE | |
|----------|-----|---|---|--|--|
| N | ΟΤΕ | 2 | Furnishing wrong information or Fake Documents for Authentication is Punishable Offence . | PHOTOGRAPH WITH NAME OF THE QUALIFICATION HOLDER | |

IMPORTANT: PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE FILLING UP.

| | DI CI | PAI | RT – Ι | |
|----------|--|------------------|-------------------|---|
| A) | Name of the Qualification Hold | per | | |
| | Educational Documents) | | | |
| B) | Male / Female | | | |
| C) | Nationality | | | |
| D) |) Date of Birth of the Qualification Holder | | ler | |
| E) | E) Passport number | | | |
| F) | Name of Father/Mother | | | |
| G) | Present Full Postal Address | | | |
| H) | Permanent Full Postal Address Qualification holder (including No. if any) | of the contac | t | |
| I) | Details of present Employment Designation, Name and full add the office, etc. | i.e. Iress of | | |
| J) | If Qualification Holder is a stud indicate the Course studying na the College and address. | ent, ame of | | |
| K) | Purpose for which authentication sought including Country of des and whether got employment or | stinatic not | | |
| De | tails of original certificates of | Diplon | na/Degree s | ought to be authenticated. |
| Sr No | | Year | Roll/ Reg. No. | Name of the University/ Board/Council/Institutions |
| | | · 4-10-10-1 | | ,,,,,,, |
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| | | | | |

PART – II

DETAILS OF PAYMENT FOR AUTHENTICATION

Details of payment of Fees Rs.50/- per certificate.

Receipt No.

Date:

Signature of Cashier:-

PART - III

FOR PERSONS PRESENTING FORM ON BEHALF OF QUALIFICATION HOLDER

| 1 | Name | |
|---|--|--|
| 2 | Relationship with Qualification Holder | |
| 3 | Name of the Father | |
| 4 | Occupation and office address including contact.No., if any | |
| 5 | If student, name of the courses studying college and address | |
| 6 | Nationality | |
| 7 | Residential Address (with Telephone No, if any) | |
| 8 | Permanent address in home country | |
| 9 | Identity Card Number | |

PART - IV

UNDERTAKING (TO BE FURNISHED BY ALL)

1. I solemnly declare that the documents presented for authentications are original and genuine and the information given by me above are true to the best of my knowledge and belief. If the documents submitted by me are found to be fake or information furnished by me false, I am responsible for the same and action may be taken against me as considered necessary.

2. Received back all documents in original.

Signature with date.....

Name in full (in block letters).....

Requirements for authentication of Educational Certificates:

- 1. Original Degree/Diploma
- 2. Copy of Degree/Diploma
- 3. Copy of final Semester/year Marksheet
- 4. Copy of passport
- 5. Payment of Rs. 50/- per Certificate

DIRECTORATE OF TECHNICAL EDUCATION, 1ST FLOOR, DTE BLDG. ALTO PORVORIM, BARDEZ, GOA 403521, PH.2412146,