



# SRI SIDDHARTHA ACADEMY OF HIGHER EDUCATION

(Deemed to be University u/s 3 of the UGC Act, 1956)

Accredited 'A+' Grade by NAAC

Agalakote, B.H.Road, Tumkur – 572 107. KARNATAKA, INDIA.

Ph. 0816- 2275514 Fax: 0816-2275510, website: ssahe.edu.in email: coe@ssahe.edu.in

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## APPLICATION FOR THE CONVOCATION – 2025

(To be sent to the Academy through the College)

|                                                                                                                                                                                         |                                                                                                                                                                         |                                      |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------|
| In-Person <input type="checkbox"/>                                                                                                                                                      |                                                                                                                                                                         | In Absentia <input type="checkbox"/> |                                  |
| Please tick any one of the above. This is only for collection at the time of “Convocation - 2025” .                                                                                     |                                                                                                                                                                         |                                      |                                  |
| To be filled in & sent to the Principal/s of the respective constituent colleges of SSAHE on or before the due date. Degree / Fellowship Programme for which the application made ..... |                                                                                                                                                                         |                                      |                                  |
| 1                                                                                                                                                                                       | Name of the Candidate in full<br>(in capitals as registered in the Academy)                                                                                             |                                      |                                  |
| 2                                                                                                                                                                                       | Date of Birth :                                                                                                                                                         | <input type="text"/>                 | <input type="text"/>             |
| 3                                                                                                                                                                                       | Gender :                                                                                                                                                                | Male <input type="checkbox"/>        | Female <input type="checkbox"/>  |
| 4                                                                                                                                                                                       | Father's Name :                                                                                                                                                         |                                      |                                  |
| 5                                                                                                                                                                                       | Nationality :                                                                                                                                                           |                                      |                                  |
| 6                                                                                                                                                                                       | Permanent Address in block letters with PIN code (to which certificate may be sent) :                                                                                   |                                      |                                  |
| 7                                                                                                                                                                                       | Mobile No. :                                                                                                                                                            |                                      |                                  |
| 8                                                                                                                                                                                       | E-Mail ID :                                                                                                                                                             |                                      |                                  |
| 9                                                                                                                                                                                       | Examination passed with details [with branch if any] (Attested copies of marks card of all the Academy examinations should be enclosed)                                 | Final Exam                           | Reg. No.                         |
| 10                                                                                                                                                                                      | Date of completion of Internship (if Prescribed) :                                                                                                                      | Month                                | Year                             |
| 11                                                                                                                                                                                      | Whether passed lower examination after passing final examination? Submit details if yes.                                                                                | From date:                           | To date:                         |
| 12                                                                                                                                                                                      | Name of the College:                                                                                                                                                    | Yes / No                             | Final Year Passed year & month : |
| 13                                                                                                                                                                                      | Whether the prescribed fee has been: remitted? If so furnish details. If paid while paying the final examination fee, the photocopy of the bank challan to be enclosed. | Lower exam passed year & month :     |                                  |
|                                                                                                                                                                                         |                                                                                                                                                                         | Challan No./ DD No.                  | Amount:                          |
|                                                                                                                                                                                         |                                                                                                                                                                         | Date:                                |                                  |
|                                                                                                                                                                                         |                                                                                                                                                                         | Bank:                                |                                  |

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|    |                                         |                                                                           |
|----|-----------------------------------------|---------------------------------------------------------------------------|
| 14 | <b>Furnish the following documents</b>  |                                                                           |
|    | a) All marks cards of.....              | Enclosed <input type="checkbox"/> / Not Enclosed <input type="checkbox"/> |
|    | b) Internship / Training Certificate    | Enclosed <input type="checkbox"/> / Not Enclosed <input type="checkbox"/> |
|    | c) Fee details                          | Enclosed <input type="checkbox"/> / Not Enclosed <input type="checkbox"/> |
|    | d) 2 Recent Colour passport size photos | Enclosed <input type="checkbox"/> / Not Enclosed <input type="checkbox"/> |

Certified that the details and information furnished above are true & correct.

**Place:**

**Date:**

**Signature of the Candidate**

The information furnished by the candidate as above and Sl. No. 14 is correct as per the records maintained in the college.

**Place:**

**Date:**

**Signature of the Principal / Director / Dean with Seal**

**Instructions to the Candidate**

- Candidates should write their name (in capital letters) legibly as registered for the Academy examination
- Self attested copies of marks cards of all the examinations should be enclosed
- Candidate should write their optional / electives / Specializations clearly in the applications.
- Ph.D candidates should enclose a copy of declaration of results and mention their titles of the thesis legibly.
- Candidate should write their name and postal address legibly in the columns provided for in the application.
- The prescribed fee (in Rupees) for the degree certificate are as follows:

|    |                                                | In person    | In Absentia (by Post) |
|----|------------------------------------------------|--------------|-----------------------|
|    |                                                | Indian (Rs.) | Indian (Rs.)          |
| A. | Under Graduate (Medical, Dental & Engineering) | 4,000/-      | 4,500/-               |
| B. | Post Graduate Degree (Medical & Dental)        | 7,000/-      | 7,500/-               |
| C. | Post Graduate Degree (M.Tech & MCA)            | 4,000/-      | 4,500/-               |
| D. | Ph.D / M.Sc (Engg).                            | 10,000/-     | 10,500/-              |
| E. | Fellowship                                     | 10,000/-     | 10,500/-              |

**(Demand Draft in favour of "Registrar, SSAHE", Payable at Tumkur, Karnataka) or Through online payment:-[www.ssahe.edu.in](http://www.ssahe.edu.in)**

- Two copies of recent colour passport size photographs of the candidate to be sent:
  - One copy duly attested and affixed to the application
  - The name & Reg. No. of the candidate, faculty and the college should be clearly mentioned on the back of the other photo and to be put in separate cover & stapled to the application.
- Prescribed fees once paid will not be **refunded or adjusted** for future convocations.
- No application will be accepted after the due date.
- No application will be accepted directly in the Academy.
- Incomplete and incorrect applications will be summarily rejected and no correspondence will be entertained in the matter.**
- 'In person'** means that the candidate has to be present himself / herself physically at the time of convocation to receive the Degree. **'In Absentia'** means that the presence of the candidate at the time of convocation is not required and the Degree certificate will be sent by Registered post after the convocation.