#### SADHANA EDUCATION SOCIETY'S



(Registered under society's act of 1860 & Bombay Public Trust Act 1950) Linguistic (Gujarati) Minority

## L. S. RAHEJA COLLEGE OF ARTS & COMMERCE

Relief Road, Santacruz (W), Mumbai - 400 054.

Tel.: 2660 9320 / 2661 4101 • E-mail : degree.office@Israheja.org / principal@Israheja.org Website : www.lsraheja.org

#### PROCESS AND FEE STRUCTURE FOR VERIFICATION OF DOCUMENTS-2020-21

## **Requirements:**

- 1. Application in the given format.
- 2. LEGIBLE photocopy of document/s to be verified.
- 3. DD in favour of "L.S. Raheja College of Arts and Commerce" (Fee as prescribed)

The fees for document verification with effect from April 01, 2021.

Sr. No.	Year of Passing	Normal Rate in₹ (20 DAYS)	Urgent 50% Normal Rate in ₹ (7/8 DAYS)	Total Amount in ₹		
1	2021					
2	2020	500	250	750		
3	2019					
4	2018					
5	2017			1050		
6	2016	700	350			
7	2015					
8	2014					
9	2013					
10	2012			1275		
11	2011					
12	2010	850	425			
13	2009					
14	2008					
15	2007					
16	Prior to 2006	1000	500	1500		

The above fees are as per University of Mumbai circular dated 10 February 2021.

In view of country-wide PANDEMIC SITUATION, you can email Application and Documents in a pdf at "put your email". On receiving your email, you will be informed of BANK DETAILS. Deposit the fee and send a scanned copy of STAMPED BANK DEPOSIT SLIP to the same email id. You will receive the Verification Report within the time as specified.

Please note there can be a delay due to statewide LOCKDOWN, hence low attendance of staff.

**PRINCIPAL** 

## SES's L. S. RAHEJA COLLEGE OF ARTS & COMMERCE, MUMBAI 400 054

# **APPLICATION FORM FOR VERIFICATION OF DOCUMENTS / MARK SHEET/S.**

Date:

The Principal, S. Raheja College of Arts & Commerce, Mumbai 400 054.  PUT X against the correct option OR strike out which not applicable Sub.: Verification of:  LEAVING CERTIFICATE MARKSHEET/S Etc.  BA BCOM BMS BAF B.SC.IT BMM/BAMMC BFM BBI M.COM  Sir, request you to verify my documents as stated above. Here are my details: L. Personal Details: (PLEASE USE CAPITAL LETTERS ONLY)  NAME: (Surname) (Name) (Father's Name)  P. E-mail Address:  Current Student Alumnus  Current Address:  Documents for which verification is required  i	To,									
PUT X against the correct option OR strike out which not applicable Sub.: Verification of:    LEAVING CERTIFICATE   MARKSHEET/S Etc.	The Prir	ncipal,								
BA BCOM BMS BAF B.SC.IT BMM/BAMMC BFM BBI M.COM  Sir, request you to verify my documents as stated above. Here are my details:  L. Personal Details: (PLEASE USE CAPITAL LETTERS ONLY)  NAME:  (Surname) (Name) (Father's Name)  2. E-mail Address:  Cel: (Resident):  Mobile No:  Fel: (Resident):  Documents for which verification is required  i		-	rts & Comm	nerce,						
BA BCOM BMS BAF B.SC.IT BMM/BAMMC BFM BBI M.COM  Sir, request you to verify my documents as stated above. Here are my details:  L. Personal Details: (PLEASE USE CAPITAL LETTERS ONLY)  NAME:  (Surname) (Name) (Father's Name)  2. E-mail Address:  Current Student Alumnus  3. Current Address:  Fel: (Resident):  Mobile No:  1. Employment:  ii.  Iii.  Bank Details:  DD NO:  (Name of the Student with signature)  Bank Details:  DD NO:  (Name of the Student with signature)  Below the student of documents / mark sheet/s.	Mumba	ii 400 054.	PUT X ag	ainst the corre	ct opti	on OR strike	out wh	nich not ap	plicable	
Sir, request you to verify my documents as stated above. Here are my details:  1. Personal Details: (PLEASE USE CAPITAL LETTERS ONLY)  NAME:  (Surname) (Name) (Father's Name)  2. E-mail Address:  Current Student Alumnus  3. Current Address:  Fel: (Resident):  Mobile No:  1. Employment:  No.  Fee payable Rs.  Bank Details:  DD NO:  (Name of the Student with signature)  Felevied Rs.  Receipt No.  Adate  R	Sub. : <b>\</b>	erification of	LEAV	LEAVING CERTIFICATE N			MARKSHEET/S Etc.			
request you to verify my documents as stated above. Here are my details:  L. Personal Details: (PLEASE USE CAPITAL LETTERS ONLY)  NAME:	ВА	всом	BMS	BAF I	B.SC.IT	вмм/в	АММС	BFM	BBI	M.COM
NAME:	Sir,									
NAME:	I reques	st you to verify i	my docume	ents as stated a	above. H	Here are my	details:			
(Surname) (Name) (Father's Name)  2. E-mail Address: Current Student Alumnus  3. Current Address: Mobile No:	1. Pers	onal Details: (F	PLEASE US	E CAPITAL LE	TTERS (	ONLY)				
Current Student Alumnus Current Student Alumnus Current Address: Current Address: Alumnus Current Address: Current Address: Current Address: Alumnus Current Student Alumnus Current Student Alumnus Current Student Alumnus Current Student Current Student Alumnus Current Student Alumnus Current Student Current Current Student Current Current Student C	NAI	ME:								
Bank Details:  DD NO:  (Name of the Student with signature)  Receipt No  Details Receipt No  Details Resident):  Mobile No:  Mobile No:  Purpose of Verification:  1. Employment:  2. Higher Studies  (Name of the Student with signature)		(Surname	2)	(Name)		(Fa	ther's N	lame)		
Tel: (Resident): Mobile No:  1. Documents for which verification is required  1	<b>2.</b> E-ı	mail Address: _					Curr	ent Stude	ent 🔲 🛮 A	lumnus 🗌
Tel: (Resident): Mobile No:    Documents for which verification is required										
Documents for which verification is required i	<b>3</b> . Cur	rent Address:	:							
Documents for which verification is required i										
ii	Tel: (Re	esident):		N	lobile N	No:				
ii	<b>4.</b> Doo	cuments for w	hich verifi	cation is requ	ired					
iii				•						
iii	ii			•••••			Purpo	se of Verif	ication:	
Bank Details:  DD NO:  (Name of the Student with signature)  FOR OFFICE USE ONLY Received Rs Receipt No date Being the payment against verification of documents / mark sheet/s.	iii						-			
Bank Details:  DD NO:  (Name of the Student with signature)  FOR OFFICE USE ONLY Received Rs Receipt No date Being the payment against verification of documents / mark sheet/s.	iv									
DD NO:  (Name of the Student with signature)  FOR OFFICE USE ONLY  Received Rs Receipt No date  Being the payment against verification of documents / mark sheet/s.	<b>5.</b> Fee	payable Rs					2. Hig	gher Studi	es	
(Name of the Student with signature)  ===================================	Ва	ank Details:								
### Total Control Cont	DI	D NO:								
Received Rs Receipt No date date Seing the payment against verification of documents / mark sheet/s.						(N	lame of	the Stud	ent with s	ignature) 
Being the payment against verification of documents / mark sheet/s.			D	<b></b>		<b></b>			<b></b>	<b></b>
	-				-			Signat	ture of the cl	erk
n view of country wide PANDEMIC SITUATION you can Email Application and documents in PDF form to	In view o	f country wide PAN	NDEMIC SITU	ATION you can Er	nail Appl	ication and do	cuments	in PDF form	to	

- (1) atul.khare@lsraheja.org for BA and BCOM, and
- (2) mahesh.gosavi@lsraheja.org for all Self finance Section