



**GOVERNMENT OF KERALA - DEPARTMENT OF TECHNICAL EDUCATION**  
**Board of Technical Examinations**  
**APPLICATION FOR DUPLICATE / TRIPLICATE QUALIFICATION CERTIFICATE**

Details of fee remitted	
a. Amount remitted	
b. Name of Treasury	
c. Chalan/Receipt No	
d. Date of remittance	
<b>Fee remitted under the Head of Account 0202-02-800-94-Other Receipts</b>	

Name of the Applicant	
Address for Communication with District & PIN Code	
Phone Number.	
Name of Parent/ Guardian	
Date of Birth	
Name of Duplicate/ Triplicate Certificate required	
Particulars of Examination : Reg. Number: Year & Month of the Examination	
Circumstances under which a duplicate/ Triplicate Certificate is applied of : a. If the original / duplicate certificate is irrecoverably lost, produce declaration of the candidate ( in Kerala Stamp Paper worth Rs. 220/- ) attested by a First Class Magistrate of Judicial Department under the seal of his Court or by the Officer commanding in the case of Jawans, detailing the circumstances under which it was lost. b. If the original /duplicate certificate is damaged, give details and enclose its remnants.If remnants are not available, give reasons. c. If the original / duplicate certificate was cancelled, give Order No & Date of Cancellation.	
Has the applicant applied for a duplicate /triplicate certificate earlier? If so, enclose a copy of such a certificate issued.	
Other particulars, if any required for the issue of duplicate/ triplicate certificate.	

**Certified that the original/duplicate certificate issued to me was irrecoverably lost/ damaged / cancelled and the above mentioned details furnished by me are correct.**

**Station:**  
**Date:**

**Name & Signature of the Candidate**

**DECLARATION**

I (Name) .....  
(Address).....  
.....  
.....

hereby declare that the original / duplicate certificate has not been allowed to be misused and if it is found or recovered on a later date, it will be surrendered to the Controller of Technical Examinations, Kaimanam, Thiruvananthapuram -40.

Station:

Date:

Name & Signature of the Candidate

**Certificate from the Head of the Institution**

(This certificate is to be furnished by the Head of the Institution where the applicant has studied for the programme)

Certified that to the best of my information and belief the original / duplicate certificate issued to the applicant was irrecoverably lost/ damaged/ cancelled. I have carefully verified the particulars furnished above by the candidate and found them correct. I recommend that a duplicate/ triplicate certificate may be issued to the applicant.

Station:

Date:

Name & Signature of Head of Institution

(Office Seal)