



ST. JOSEPH'S COLLEGE (Autonomous)

ಸಂತ ಜೋಸೆಫರ ಮಹಾವಿದ್ಯಾಲಯ (ಸ್ವಾಯತ್ತ)

P.O. Box 27094, 36, Lalbagh Road, Bengaluru - 560 027.

Ph : 2221 1429, 2227 4079, Fax : 080-2224 5831

Website : www.sjc.ac.in | E-mail : admin@sjc.ac.in

Re-accredited with 'A++' Grade (IV cycle) & 3.79/4 CGPA by NAAC | 'College of Excellence' by UGC

NOTICE

26-02-2026

As per the notification dated 17-2-2026, the Bengaluru City University has called for applications for the award of degree certificates during the fifth annual convocation of the University from eligible candidates **by the 9th of March 2026**. Students can apply from the 26th of Feb 2026 to the 9th of March 2026 on weekdays from 10.30 am to 1.30 pm and 3pm to 4 pm.

Note : Saturday, office opens only till 11.30 Am.

Who can apply?

Postgraduate & Undergraduate students whose registration number starts with 18 and above and have completed all programme completion requirements by April 2025.

Application forms:

Candidates must download both the convocation application form and the alumni registration form. Both applications are to be filled and submitted to the Staff(s) responsible for collecting the same in the Examination help desk of SJU along with the required documents before the last date.

The model filled-in application is displayed on the notice board.

Fee for Convocation certificate :

For Indian nationals : ₹ 3130/- for who completed in the year April 2025 and Rs. 3670/- for who completed in the year 2024 and below ; For Foreign nationals: ₹ 11,704/-

Fee for Alumni Registration:

UG and PG students : ₹ 500/-

(Postgraduate students who did their undergraduate programme in this college and had already paid the alumni fee need not have to submit the alumni application form and pay the fee for alumni registration again. However, they must submit a photocopy of the undergraduate PDC or consolidated marks card as proof of study in this college)

Candidates must download two challan forms. One for Convocation and the other for the Alumni registration. They must pay the required fee in the South Indian Bank, St. Joseph's University campus branch.

Documents to be submitted: (i) Filled in application form for the convocation (ii) Fee paid Challan for Convocation (iii) Filled in application for alumni association (iv) Fee paid Challan for alumni association (v) Two passport size photographs (vi) Self attested semester wise marks card copies (Download from the Linways portal and take printouts. The marks card should have the title " STATEMENT OF MARKS". The marks cards with the title " PROVISIONAL MARKS CARD" will not be accepted (vii) Self-attested consolidated marks card.

Controller of Examinations

ಡಾ. ಮನಮೋಹನ್ ಸಿಂಗ್
ಬೆಂಗಳೂರು ನಗರ ವಿಶ್ವವಿದ್ಯಾನಿಲಯ



Dr. MANMOHAN SINGH
BENGALURU CITY UNIVERSITY

**APPLICATION FORM FOR APPLYING TO THE 5th ANNUAL CONVOCATION OF
DR MANMOHAN SINGH BENGALURU CITY UNIVERSITY -2026**

Name of the Candidate: (IN BLOCK LETTERS as mentioned in the marks card)	
Male / Female / SC / ST / Gen (Please tick the box)	Male Female SC ST General
Name of the Mother	
Name of the Father	
Course / Degree	
Optional Subjects (B.A., B.Sc., FAD etc)	
Title of Thesis (For Ph.D. Scholars)	
Elective group/paper- B.Com/BBM/MBA/ M.Com/ B.Ed./M.Ed. etc.	
Subject studied- (PG-UG)	
Name of the College	
Register Number	
<u>Details of Examination passed</u>	
Overall Percentage:	C.G.P.A: Class:
Grade:	Passing Month / Year:

1. I hereby solemnly declare and promise that, if admitted to the degree of _____ for which I have been recommended, I shall, in my daily life and Conversation conduct myself as befits as member of this University; that I shall to the utmost of my capacity and opportunity support the cause of morality and sound learning: and that as far as in me lies, I shall uphold and advance the social order and the well being of my fellowmen.
2. That I shall faithfully and carefully fulfil the duties of the profession to which I may be admitted by virtue of my degree; that I shall on all occasions maintain its purity and reputation and that I shall never deviate from the straight path by making my knowledge subservient to unworthy ends.
(In case of non-professional Degrees, the 2nd Paragraph should be scored off)

Complete postal address for Communication Pin:		
Mobile No:	Email ID:	
Photo	Photo	Total amount paid:
		1. Application Fee: 2. Convocation Fee: 3. Fines: 4. Others: Total amount: DD. No. Date: Bank:

Verified from the office records and
found correct and recommended for
award of the above degree.

Date: Signature of the Candidate

Principal's Signature with seal

**STUDENT(S)
COPY**

Fee Payment Challan
St. Joseph's College



P.O.Box 27094. 36, Lalbagh Road,Bengaluru -
560027 Karnataka
Phone : 22211429, 22274079 website:-
<http://www.sjc.ac.in> | E-mail : sjcblrfo@gmail.com

STUDENTS (Completed in the year April 2025)

**OFFICE
COPY**

Fee Payment Challan
St. Joseph's College



P.O.Box 27094. 36, Lalbagh Road,Bengaluru -
560027 Karnataka
Phone : 22211429, 22274079 website:-
<http://www.sjc.ac.in> | E-mail : sjcblrfo@gmail.com

**BANK
COPY**

Fee Payment Challan
St. Joseph's College



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560027 Karnataka
Phone : 22211429, 22274079 website:-
<http://www.sjc.ac.in> | E-mail : sjcblrfo@gmail.com

Student(s) Name:

Register Number:

Academic Year:

Bank Name: SOUTH INDIAN BANK

Account No:0108053000019932

IFSC Code: SIBL0000964

FEE DETAILS	:CONVOCATION FEE
Date of Payment :	
Convocation Fees :	Rs. 3130/-

**NOTE: Fees to be paid in South Indian Bank,
SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

Student(s) Name:

Register Number:

Academic Year:

Bank Name: SOUTH INDIAN BANK

Account No: 0108053000019932

IFSC Code: SIBL0000964

FEE DETAILS	:CONVOCATION FEE
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Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

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Register Number:

Academic Year:

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SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

STUDENTS Completed in the Year 2024 and below

**STUDENT(S)
COPY**

Fee Payment Challan
St. Joseph's College

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Student(s) Name:

Register Number:

Academic Year:

Student(s) Name:

Register Number:

Academic Year:

Student(s) Name:

Register Number:

Academic Year:

Bank Name: SOUTH INDIAN BANK

Account No:0108053000019932

IFSC Code: SIBL0000964

FEE DETAILS :CONVOCATION FEE	
Date of Payment :	
Convocation Fees :	Rs. 3670/-

**NOTE: Fees to be paid in South Indian Bank,
SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

FEE DETAILS :CONVOCATION FEE	
Date of Payment :	
Convocation Fees :	Rs.3670/-

**NOTE: Fees to be paid in South Indian Bank,
SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

FEE DETAILS :CONVOCATION FEE	
Date of Payment :	
Convocation Fees :	Rs.3670/-

**NOTE: Fees to be paid in South Indian Bank,
SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

**STUDENT(S)
COPY**

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St. Joseph's College**

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560027 Karnataka
Phone : 22211429, 22274079 website:-
http://www.sjc.ac.in | E-mail : sjcblrfo@gmail.com

Student(s) Name:

Register Number:

Academic Year:

Bank Name: SOUTH INDIAN BANK

Account No:0964053000002147

IFSC Code: SIBL0000964

FEE DETAILS : ALUMNI FEES	
Date of Payment :	
Convocation Fees :	Rs. 500/-

**NOTE: Fees to be paid in South Indian Bank,
SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

**OFFICE
COPY**

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St. Joseph's College**

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560027 Karnataka
Phone : 22211429, 22274079 website:-
http://www.sjc.ac.in | E-mail : sjcblrfo@gmail.com

Student(s) Name:

Register Number:

Academic Year:

Bank Name: SOUTH INDIAN BANK

Account No: 0964053000002147

IFSC Code: SIBL0000964

FEE DETAILS : ALUMNI FEES	
Date of Payment :	
Convocation Fees :	Rs. 500/-

**NOTE: Fees to be paid in South Indian Bank,
SJC Campus.**

TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory

**BANK
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Student(s) Name:

Register Number:

Academic Year:

Bank Name: SOUTH INDIAN BANK

Account No :0964053000002147

IFSC Code: SIBL0000964

FEE DETAILS : ALUMNI FEES	
Date of Payment :	
Convocation Fees :	Rs. 500/-

**NOTE: Fees to be paid in South Indian Bank,
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TO BE FILLED BY BANK:

Branch Name : _____

Branch Code : _____

Transaction Ref No. : _____

Deposit Date : _____

Branch Receipt Stamp

Authorised Signatory



ST. JOSEPH'S UNIVERSITY

LANGFORD ROAD, BENGALURU-560027 ALUMNI/AE

ASSOCIATION FORM

- ❖ The registration for the alumni association is available only for outgoing and former students of St. Joseph's College (Autonomous), Bengaluru.
- ❖ As part of the registration please provide correct information, as it will help us to identify you from our records for future reference.

First Name	
Middle Name	
Last Name	
Date of Birth (According to College Record)	
Stream (B.Sc.,BCA,BSW,BVOC,B.Com,BBA & PG)	
Course(s) Studied	
Year of Passing	
Name any 3 Teachers who taught you in St. Joseph's College (Autonomous)	
Permanent Address	

EMAIL ID _____

CONTACT NUMBER _____

Membership Fee: Rs.500/- (Rupees five hundred only)

Date

Signature

Alumni Association Contact:

Email Ids:

alumni@sjc.ac.in

davidalphazee@gmail.com

Contact Nos:

08022274079

08022211429