

R-16/INT/PhD



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Office of the Controller of Examinations  
End Semester Examinations  
EXAM APPLICATION FORM – APR/MAY - 2019  
(To be filled by the candidate in capital letters)

1. Candidate's Name : \_\_\_\_\_  
2. PRN : \_\_\_\_\_  
3. Date of Birth : \_\_\_/\_\_\_/\_\_\_  
4. Admitted Year : \_\_\_\_\_  
5. Programme Name : \_\_\_\_\_  
6. Course to be appeared

Year: \_\_\_\_\_  
Semester: \_\_\_\_\_

Sr. No.	Course Code	Name of the Course
1		
2		
3		
4		
5		
6		
7		
8		
9		
Total No. of courses Registered		

**BACKLOG**

Sr. No.	Year /Sem	Course Code	Name of the Course	Fee Per Course UG – Rs.400/- Ph.D/PG – Rs. 600/-
1				
2				
3				
4				
5				
6				
7				
Total No. of Courses Registered			Total Fee to be Paid (A) Degree Fee Rs 1500/- (B) (For Final Year students only)	

Total Fee to be paid (A + B) Rs. \_\_\_\_\_ DD No. /POS / Online \_\_\_\_\_ Date : \_\_\_\_\_  
Bank name & Branch \_\_\_\_\_ Fee Receipt No : \_\_\_\_\_

Signature of the student  
Mobile No.

Signature of the Dean/HOD

Accounts Dept

(For Office Use only)

Application No:

Received on :

Controller of Examinations

\*Incomplete / wrong data filled will be lead to cancellation of this Application.