

**OFFICE OF  
THE CONTROLLER OF EXAMINATIONS: BODOLAND UNIVERSITY**

Debargaon, P.O. Rangalikhata  
Kokrajhar, BTC, Assam-783370



Tel/Fax No. 03661-277129

No. BU/COE/M.Ed./EX- II/2021/217/1462

Dated: 11-08-2021

**NOTIFICATION**

Submission of Examinations forms for M.Ed. students in 2<sup>nd</sup> Semester (Regular) Examinations of Bodoland University Affiliated Colleges for the Even Semester Examinations, 2021 has been rescheduled. The schedule of submission of forms and fees for different subjects has been given below. Examination forms will be issued w.e.f. 12/08/2021 to 17/08/2021 from concerned colleges.

Fee Structure For 2 <sup>nd</sup> Semester (New)		
Sl. No.	Category	Total Fees after 20% exemption
1	Regular	Rs. 2464.00

- Late fine Rs. 200
- Centre Fees Rs. 300
- Practical Fees: As decided by the concerned college
- Soft copy of the form will be shared with the college and the college should supply hard copy of the same to the students

**Note:**

1. The College have to submit the completed Examinations forms along with Statement (Soft copy and hard copy) and fees to the Bodoland University on 17<sup>th</sup> August, 2021 without fine and 19<sup>th</sup> August, 2021 with fine.
2. The College shall verify the validity of the Registration No. of the student before submission of examinations form.
3. Without Bodoland University Registration Number a student cannot apply Final Semester Examination form fill up.

Controller of Examinations  
Bodoland University

Memo No. BU/COE/M.Ed./EX- II/2020/ 217/1462  
Copy forwarded to:

Dated: 11-08-2021

1. The Academic Registrar, BU
2. The Director, CUDC, BU
3. The Director, Students Welfare, BU
4. The P.S to Finance Officer, BU
5. The Principals, All Affiliated Colleges
6. The Deputy Registrar(Exams), BU
7. P.S to VC, BU for kind information to Hon'ble VC.
8. P.S to Registrar, BU for information to Registrar.
- ✓ 9. The System Administrator, BU for necessary action.
10. Notice Board
11. Guard File

Controller of Examinations  
Bodoland University

**CONTROLLER OF EXAMINATIONS  
BODOLAND UNIVERSITY  
KOKRAJHAR, ASSAM**

**BODOLAND UNIVERSITY**

APPLICATION FOR M.Ed. EXAMINATION : SEMESTER \_\_\_\_\_ Year \_\_\_\_\_

For University Use only

Code No.	<input type="text"/>	Roll No.	<input type="text"/>
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To,  
The Deputy Registrar (Examinations), Bodoland University, Debargaon, Kokrajhar-783370.  
(Through the Principal, \_\_\_\_\_ College).

Sir,  
I request the permission to appear myself at the ensuing M.Ed. Examination with the following particulars duly filled in. The fee of Rs. \_\_\_\_\_ is remitted herewith.

**INSTRUCTIONS TO THE APPLICANT**

1. Application should be filled in with BLACK coloured Ball-point pen.
2. One Box  should be left BLANK between two words while filling in the form.
3. Application is to be filled in BLOCK LETTERS other than clauses 4, 5 and 12.
4. Clauses 4, 5 and 12 are to be ticked (✓) in the appropriate box.
5. Copies of B.Ed. Pass Certificate and BU Registration Certificate duly attested by the Principal must be submitted along with the Application without which ADMIT CARD shall not be generated/ issued.
6. Correct Code abbreviations for different Course(s) must be followed from the list of Abbreviation provided.
7. Medium of examination (except language method) is English.
8. Application, complete in all respect, must be submitted within the date fixed for the purpose.

**PARTICULARS TO BE FILLED IN BY THE CANDIDATE**

1. Name of the Candidate :   
(As per Registration Certificate)
2. Father's Name :
3. Mother's Name :
4. Sex : Male  Female  Transgender
5. Caste : General  OBC  MOBC  SC  ST
6. Date of Birth :  (DD/MM/YYYY : as per Matric/HSLC Exam. Record)
7. BU Registration No.
8. Address : Village   
P.O.  Dist.   
State  PIN
9. Name of the College admitted to :
10. Date of Admission :  (DD/MM/YYYY : as per College Admission Register)
11. Enrollment No. :   
(As per College Admission Register)

*Please Turn Over*

12. Stream :      Arts                      Science                      Commerce   

13. No. and Year of passing B.Ed. Examination :

Roll          No.          Year   

14. If debarred from appearing at any University/Board Examination, state the Examination :

Roll          No.          Year   

Sl. No.	COURSE CODE	COURSE TITLE

**DECLARATION BY THE CANDIDATE**

If any of the statements made as above in the application is found false or misleading, and, if it contradicts any rule or regulation relating to the M.Ed. Examination under Bodoland University, Regulation on Master of Education (M.Ed.), my admission to the above examination shall be liable for cancelation at any time at the discretion of the University Authority before or after the examination/results.

Date : \_\_\_\_\_ Yours faithfully,  
 Place : \_\_\_\_\_  
 Contact No. \_\_\_\_\_ (Full Signature of the Candidate)

**CERTIFICATE FROM THE PRINCIPAL**

- I certify that the particulars furnished by the above candidate have been verified and found correct.
- The candidate has attended minimum attendance in various courses as required under M.Ed. Examination Regulation.
- The candidate has submitted all Tasks and Assignments in due time.
- He/She has participated in all continuous internal assessments and obtained minimum qualifying marks/grade.
- His/Her conduct and progress in studies have been satisfactory during the course of the study in this College.
- I certify that my College has been granted affiliation/permission by the Bodoland University to send up the candidate to the above examination in all subjects offered by him/her.
- The candidate is eligible to appear M.Ed. \_\_\_\_\_ End-Semester Examination, \_\_\_\_\_

Signature of the Principal\* \_\_\_\_\_  
 \_\_\_\_\_ College  
 (With Office Seal and Date)

\*Stamp Signature of the Principal shall not be accepted.