

Semester Examination, 20_____

Department				
Roll No.				
Semester				
Admission Year				

Attempt No. 1 st / 2 nd / 3	FOR OFFICE USE ONLY
1	ter Examination Roll No.
Registration No.	Semester Exam. to appear
	Provisional permission granted/Not granted
	Deputy Registrar (Exams)
Т-	Signature (with date and seal)
To, The Controller of Bodoland Univer	
Sir,	
	the backlog (arrear) & betterment (repeat) provision, and reques
	f at the ensuing Semester Examination to be
neld in the month of	
Rupees(peen forwarded/deposited to	in words) have
t contradicts any rules and reg	made in the application is found to be false or misleading, and, it alations relating to Bodoland University Examinations, my admissible shall be cancelled forthwith by the University without showing Yours obediently,
	••
	Name (in full)
	BU Regd. No. Year Permanent Address
	- Commence / National
	Contact No.
	CERTIFICATE
egulation to be eligible t	andidate has fulfilled all the requirements under BU examination appear in backlog (arrear)/betterment (repeat) paper
I know nothing against l	at the semester examination, 201 is/her moral character.
Date:	Signature of the HoD

(Fill in particulars on the reverse)

Particulars to be filled in by the Candidate

1.	•	n CAPITALS):					
2							
2.	B.U. Registration No. & Year of						
•	(Attach attested photocopy) BU Enrollment No.						
3.	BU Enrollmen	it No.	•••••				· · · · · · · · · · · · · · · · · · ·
4.	Date of Admission to 1 st Semester						
5.	Father's/Guardian's Name						
6.	Home Address in details						
7.	Details of Exam. fee deposited						
0	(Attach photocopy of receipt) Particulars of Semester Examination (Attach attested photocopy of Grade Card)						
8. r							Card)
	Department	1st Semester		arse/Paper appear in 1 st Sem. Exam.		Point obtained	SGPA
H		+-				T omit ootamou	
-							
9.	Course/Paper in which intending to appear (See the relevant rules for backlog/better- ment Exam.)						
·ſ	Department	Backlog (arrear)	T	Grade & Grade	В	etterment (Repeat)	Remarks
	<u> </u>	Paper(s) to appea	ır Pc	oint obtained earlier			Remarks
,						•	
L		<u></u>					
10.	If expelled and debarred from appearing at any University Examination, mention in detail						
	Department	Examination year of Expulsi		Enrollment No.	R	egistration No.	Remarks
							:
L							
C	hecked and Cou	ntersigned by		(Signatu	re c	of the Applicant w	rith date)

Checked and Countersigned by Head of the Department (with date & seal)

(Signature of	the Applicant with date)
Contact No.	