

BODOLAND



UNIVERSITY

..... Semester Examination, 20.....

APPLICATION

Department

Roll No.

Semester

Admission year

To,

The Controller of Examinations,
Bodoland University, Kokrajhar

Sir,

I do submit the examination fee and other documents along with this application and request permission to present myself at the ensuing Semester Examination to be held in the month of 20

I have filled in detailed particulars on the reverse and declare that if any of the statements made in the application is found false or misleading, and, if it contradicts any rules and regulations relating to Bodoland University Examinations, my admission to the above Examination shall be cancelled forthwith by the University without showing any reason thereof.

Yours obediently,

Name (infull)

BU Regd. No. Year

Present Address

.....

Contact No.

FOR OFFICE USE ONLY

- (A) On verification of application and documents, the candidate bearing Enrollment No., and BU Regd. No. is found to be eligible to provisionally appear at Semester Examination of
- (B) The candidate has not submitted (1) examination fee, (2) document(s), hence, is not eligible to appear at Semester Examination of

Signature of Office Assistant/Receiving Officer (with date & seal)

Provisional permission granted/ not granted

Deputy Registrar (Examinations)
Signature (with date & seal)

PTO

Particulars to be filled in by the Candidate

(Candidates must submit documents of proof on (1) Exam. Fee (2) Date of Birth (3) BU Registration and (4) Clearance of dues from library/department etc.)

1. Name in full (in CAPITAL) :
MS/MR
2. Sex :
3. Date of Birth : (attach photocopy of proof)
4. BU Enrollment No : Year :
5. BU Registration No : Year : (attach photocopy)
6. Department to which admitted :
7. Date of admission to course :
8. Father's/ Guardian's Name :
9. Particulars of Examination last appeared : (attach photocopy of Grade Card)

Examination	Roll No & year	Course/paper	SGPA	Backlog, if any

10. If expelled and debarred from appearing at any University Examination, state

Examination	Roll No & year	Reg. No & year	Exam & date of expulsion	Remarks

11. Particulars of Examination appearing at :

Examination	Reg. No & year	Course/Paper(s) appearing	Remarks

12. Examination fee deposited : Rs. (attach photocopy of receipt)

13. Particulars to be filled in by the Head of the Department :

Department	Date of Adm. to course	Date of complt. of course	No. of Lectures delivered	% of lectures attended

I certify that this candidate has attended the minimum% of lecturers required in different course/paper(s), has cleared all dues of the Department, and obtained minimum qualifying marks/grade in In-semester examinations. I know nothing against his/her moral character. She/He may be provisionally permitted to appear the examination.

This candidate is **NOT eligible** to appear the examination for

Signature & Seal of the HoD
(with date)