

AT & PO: Anita, Kim-Olpad Highway, Dist - Surat - 394110

## **EXAMINATION FORM**

## Regular / Remedial

Form Number :									Af	Affix your recent Photo Here			
Enrollm	ent N	o:											
Import	ant Ir	struction	ıs										
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2. Candi	idate's	Name:											
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9. Detai	ls of F	Previous Se	m / Year e	xaminat	ion Re	sult:							
Examination		Board / University	Session / Year	Seat/ Roll No.	Result		ı	Marks		Course(s) passed			
					Pass	Re- appear	Fail	Maximum	Obtained	Course(s) passed			

## **UNDERTAKING**

eligibility for the examination. In case of any discrepancy for the consequences. I agree to the fact that all the disp	ons of this examination—and understood the same for m found in the particulars in this Form, I shall be responsible outes arising from the documents or information connecte ated at District Surat only to the excursion of all other Court
2) I have gone through the Important Information & Instruc	ctions as lay down in Rules & Regulations pertaining
	Signature of Candidate with date
CERTI	IFICATE
Ordinance(s)/Rule(s) and Regulation(s) to appear i bears a good moral character. It will be our respons	he conditions regarding admission as laid down in the in the above mentioned examination. The candidate sibility to check the minimum attendance, required id down in the Rules of the University/Ordinances at
(Name of Attaction Authority)	Signature of the Principal / Hod
(Name of Attesting Authority) (In CAPITALS)	(With Stamp and Date)
answer-sheet of the concerned course will be cancelled. 4)The candidate will have to submit the form for each end	in the Examination Hall. han the subject/course filled in the form, if appears then the
(For Account	ts Branch only)
1. Fee Submitted Rupees:U	Iniversity, Receipt NoDate:Date:
	(Full Signature of Accountant/Asst) must be submitted to respective Principal/HOD ion Branch only) gible, mention the reason

Admin Asst. Section Officer(Exam) Asst. Registrar CoE