

PRESIDENCY UNIVERSITY

86/1, College Street, Kolkata - 700 073

EXAMINATION APPLICATION FORM

(to be filled in by the applicant)

GEI			
	NERAL SC ST OBC PERMANENTLY DISABLED SASE TICK MARK () WHERE APPLICABLE	Semester Exam Reg. No	ination, (Year) [Regular / Backlog]
To The Controller of Examinations, PRESIDENCY UNIVERSITY, Kolkata - 700 073		Course of Study:	(B.A. / B.Sc. / M.A. / M.Sc. / Others)
Sir,	I request your permission to ap	- 	entioned Examination to be held in
	Ex	kamination, 20 (Ba	ass in the following paper(s) of the las ack papers, if any) e of any incorrect statement or ommission
of a	ny information in the application.		
Date	э		Yours obediently,
			Full Signature of the candidate.
1.	Name in full(In Block Letters & according to Regis		SUBJECTS OF EXAMINATION
1.		stration Certificate)	-
	(In Block Letters & according to Regis	stration Certificate)(Male/Female)	SUBJECTS OF EXAMINATION
2.	(In Block Letters & according to Regis	stration Certificate)(Male/Female)	SUBJECTS OF EXAMINATION
2.	(In Block Letters & according to Regis Sex Son / Daughter of	stration Certificate)(Male/Female)	SUBJECTS OF EXAMINATION
 3. 4. 	(In Block Letters & according to Regis Sex	stration Certificate)(Male / Female)	SUBJECTS OF EXAMINATION
 3. 4. 5. 	(In Block Letters & according to Regis Sex	stration Certificate)(Male / Female) eartment	SUBJECTS OF EXAMINATION
 3. 4. 5. 6. 	(In Block Letters & according to Regis Sex	eartment	SUBJECTS OF EXAMINATION

N.B.: PLEASE SUBMIT SEPARATE FORM FOR BACKLOG PAPERS (if any) Semesterwise.