

Student's Name	
Reg. No.	
Faculty/School's Name	
Father's Name	
Program	B.Voc/M.Voc in_
Present Semester	

S. No.	Sem. of Make-Up Exam (1st / 2nd / 3rd / 4th / 5th / 6th)	Course Code	Course Name	Obtained Latest Grade	In-Sem. Marks to be Included (YES / NO)
1					
2					
3					
4					
5					
6					
7					
8					

(Particulars should be filled in by the student in his / her own handwriting. Before filling up the make-up exam form, policy / rules / regulations should be read carefully)

I Solemnly declare that I have carefully read all the relevant policy / rules / regulations pertaining to Make-Up Examination of the University and I undertake to abide by the same in all respects.

ount	Total Paid Amount	Receipt No.
Sign	Student's Sign	Date

<u> </u>						
FOR FACULTY/SCHOOL USE ONLY						
It is Certified that	is a bonafide student of the Faculty/School					
of	Skills and the above mentioned 'Obtained Latest Grades'					
are verified with the results and amount paid for the make-up examination has also been verified with the						
original fee receipt. Application form is forwarded for Make-Up Examination as applied by the student.						
Exam-Coordinator's Name & Signature with Da	ate Dean/In-Charge Name & Signature with Date					
	Q.					

