CENTRAL UNIVERSITY OF HARYANA

**End-Semester Examination, ………………………………………………**

**EXAMINATION FORM**

Paste Latest Passport Size Photo with gum.

Do not staple.

(TO BE FILLED IN ENGLISH IN BLOCK LETTERS ONLY)

REGISTRATION NO.

ROLL NO.

(For Office Use Only, Not to be filled by the Candidate)

Candidate’s Signature

PROGRAMME SEMESTER

1. Name of Candidate

2. Father’s Name

3. Mother’s Name

M

F

4. Date of Birth 5. Sex Code

6. Address

State Urban(U)/ Rural(R)

Mob. No. Email

7. SC/ST/OBC/Handicapped (H)

8. Courses Offered

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Course Nomenclature** | **Course Code** |
|  | ***Core Courses*** |  |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |

|  |  |  |
| --- | --- | --- |
| **Sr. No.** | **Course Nomenclature** | **Course Code** |
| ***Elective Courses*** | |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |

9. Details of examinations already qualified

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Exam** | **Name ofBoard/University** | **Year/**  **Session** | **Roll No.** | **Subjects** | **Result** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

10. Whether simultaneously appearing in any other examination of this or any other University– Yes/ No

11. I solemnly declare that the particulars filled in by me are correct and nothing has been concealed and that in case of any discrepancy found therein, I shall be responsible for the consequences.

Date:

Place: Signature of the Candidate

**ATTESTATION**

Certified that the candidate has completed the requirements as laid down in the rules for the above mentioned class under University Roll No………………. as a regular student and is eligible to appear in the examination.He/She bears a good moral character and has signed this form in my presence.

Space for attested photo of the student

Date: Signature of the concerned/

Place: Authority/Faculty (with office seal)

Checked by the University Official Clerk….………………. Assistant…………………………..

**CENTRAL UNIVERSITY OF HARYANA**

ROLL NO. SLIP (Student Copy)

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REGISTRATION NO.

ROLL NO.

(For Office Use Only, Not to be filled by the Candidate)

Candidate’s Signature

PROGRAMME SEMESTER

1. Name of Candidate

2. Father’s Name

3. Mother’s Name

M

F

4. Address

State Urban(U)/ Rural(R)

5. Handicapped (PH/Vs)

6. Courses Offered

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. No.** | **Course Nomenclature** | **Course Code** | **Core (C)/ Elective (E)** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |
| 10 |  |  |  |

Signature of issuing authority

**CENTRAL UNIVERSITY OF HARYANA**

ROLL NO. SLIP (Office Copy)

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REGISTRATION NO.

ROLL NO.

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Candidate’s Signature

PROGRAMME SEMESTER

1. Name of Candidate

2. Father’s Name

3. Mother’s Name

M

F

4. Address

State Urban(U)/ Rural(R)

5. Handicapped (PH/Vs)

6. Courses Offered

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. No.** | **Course Nomenclature** | **Course Code** | **Core (C)/ Elective (E)** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
| 8 |  |  |  |
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| 10 |  |  |  |

Signature of issuing authority