

For Office Use Only

No. of Attempts:

Examination Fees Paid: Yes / No / Not Applicable

Remarks:

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.....

Subject Clerk:

Date:

Sectional Head's Approval

Attendance:

Recommendation: All Subjects / None / Partial (..... Subjects Only)

Remarks:

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Index No.

Sectional Head:

Date:

Deputy Registrar's Approval

Remarks:

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Index No.:

Deputy Registrar:

Date: