

14. The Reappear candidate must fill up the columns for each availed chance.
 (i) Information of Lower/Higher Examination/Reappear result of the same class.

Name of Exam	Chance availed	Year & Session	Roll No.	Result	University

15. Are you appearing in any other examination from this University or any other University simultaneously. Write 'Yes' or 'No' in the box

16. If answer to Item No. 15 is 'Yes' write Particulars of all such exam. below.

Name of Class	University / Board	Subject in which to appear	Full Subjects/Re-appear / Improvement./Additional

17. Have you ever been disqualified in any exam. or any UMC Registered against you, if yes, give detail.

University / Board	Examination	Year & Session	Roll No.	Punishment

18. University Fee Receipt No./Bank Draft No.Dated.....Amount.....

19. For Improvement candidates only

- (i) Session & Roll No. for passing final Examination
 (ii) Chance availed

Class	Session	RollNo.

DECLARATION

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

Dated :

Place :

Signature of the Candidate

ATTESTATION

(Certificate to be signed by the attesting authority)

1. I Certify that.....S/o. D/o. Shri.....is a regular student of this Dept./College and the particulars mentioned in the form have been checked and found in order, Further certified that the Dept./College is authorised to run the course / subject and the admission of the candidate is within the sanctioned strength. The Candidate bears good moral character.

Signature of the Chairperson/Principal
(With Seal)

2. I Certify that.....S/o. D/o. Shri.....appeared in.....under Roll No.....and failed/placed under Re-appear/passed.

3. He/She bears a goods moral character and has signed this form in my presence.

Note : Attestation on behalf of the Attesting officer is not acceptable.

Full Name of the Attesting Officer

Designation & Full Address of attesting authority

Place :

Dated :

Signature of Attesting Authority
(With Seal)

Remarks By University Regarding Eligibility

Eligibility Checked from Result-sheet/Gazette/Original Documents (Please Tick Mark) as under :-

Eligible

Not Eligible

i) Name of Exam/Session.....ii)Roll No.....

i) Name of Exam/Session.....ii)Roll No.....

iii) Result.....

iii) Result.....

Eligible subject to Production of.....

Not Eligible with reason.....

Clerk

Assistant

Superintendent
(Final Order)

Clerk

Asstt.

Supt.

Asstt./Dy. Registrar



Chaudhary Devi Lal University, Sirsa
Provisional Roll No. Slip

Regn. No

Roll No

(To be assigned by the Office)

1. Name of Exam.....
2. Name of Candidate.....
3. Father's Name Shri.....
4. Mother's Name Smt.....
5. Centre of Exam..... Centre No.....
6. Paper(s) in which appearing
1..... 2..... 3.....
4..... 5..... 6.....
7..... 8..... 9.....
10..... 11..... 12.....

Space for latest
Photograph
(attested by the
attesting authority)

6. Signature of the Candidate..... Controller of Examinations.....
(The candidate must sign. here before submitting this form to the University)

Chaudhary Devi Lal University, Sirsa
(For Centre Superintendent)

Regn. No

Roll No

(To be assigned by the Office)

1. Name of Exam.....
2. Name of Candidate.....
3. Father's Name Shri.....
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Space for latest
Photograph
(attested by the
attesting authority)

6. Signature of the Candidate..... Controller of Examinations.....
(The candidate must sign. here before submitting this form to the University)

TO BE FILLED IN BY THE CANDIDATE

Address for Correspondence
Exam.....Roll No.....
Name.....
Address.....
.....
Contact No.....Pin.....

Address for Correspondence
Exam.....Roll No.....
Name.....
Address.....
.....
Contact No.....Pin.....

Address for Correspondence
Exam.....Roll No.....
Name.....
Address.....
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