

**EXAM FEES RS.** 

## **DIAMOND HARBOUR WOMEN'S UNIVERSITY**

**EXAMINATION APPLICATION FORM** (to be filled in by the applicant)

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	/2 <sup>nd</sup> /3 <sup>rd</sup> /4 <sup>th</sup> Semester Examination Session		
To The	AMINATION ROLL NUMBER TO BE GIVEN BY TO BE VICE Chancellor, amond Harbour Women's University	HE OFFICE)	
	amond Harbour, South 24 Parganas.		
Ma	ndam,		
	I request your permission to appear in the	above-referred Examination of the University to	be held in
The		pees) only	is being submitted
alo	ng with this application. My brief particulars are		
Do:	te	Yours obediently.	
Dα	te		
		Full Signature of the candidate	
1.	Name in fullFirst (In BLOCK LETTERS & according to Registration Certificat	Middlee)	Surname
2.	Daughter of		
3.	·		
4.	Phone No	. Mobile No	
5.	Present classSubjectSubject	Class Roll No	of
6.	University Reg. No	of	
inf	•	xamination is liable to cancellation in the event of this application, if	•
En	clo: 1) Xerox Copy of Money Receipt		

2) Xerox Copy of Latest Grade Card of preceding Semester. (if applicable)

Yours obediently,