

Verified by:

## Alagappa University Karaikudi - 630 003, Tamilnadu.

## **DISTANCE EDUCATION** APPLICATION FOR EXAMINATIONS

	Course:     Name of Study Center:		Exam Centre:     with centre cod     Month & Year c		: :	
1.	Name of the applicant (in BLOC	<pre></pre> <pre>&lt;</pre>	:			
2. Father's Name			:			
3. Sex			: M F			
4.	Enrolment No.		:			
5.	Permanent Address with Pincode	Э	:			
6.	Year / Semester for which you and (Both Regular and Arrears) :	re appearing	Details	Nos	Amount	Total Rs.
7. EXAMINATION FEES PAYMENT DETAILS			1. Subject(s) fee			
	a) Amount paid	: Rs.	2. Practical(s) / Dissertation fee			
	b) D.D.Number	:	Cost of application form			
	c) Date of payment	:	4. Mark statement			
	d) Name and place of issuing Bank	:	fee 5. Provisional Certificate Fee *			
8. Have you paid the course fees due to the University Yes/No			6. Degree/Diploma Certificate fee *			
	·		7. External Centre fee			
Sta	ation:		8. Late fee			
Date:			Grand Total Rs.			
	Signature of	the Candidate	* To be paid l	by the fir	nal year can	didates only

**CONTROLLER OF EXAMINATIONS** 

9. Subjects in which you are appearing Title of the Paper FIRST YEAR / FIRST SEMESTER FIRST YEAR / SECOND SEMESTER **Subject Subject** Code code SECOND YEAR / THIRD SEMESTER SECOND YEAR / FOURTH SEMESTER THIRD YEAR / FIFTH SEMESTER THIRD YEAR / SIXTH SEMESTER Score out the letters and numerals which are not applicable to you **Alagappa University** Karaikudi - 630 003 DISTANCE EDUCATION EXAMINATIONS, 200 Photo to be HALL TICKET affixed (To be filled in by the candidate) here Name of the Candidate Course **Enrolment Number Examination Centre** SUBJECTS APPEARING (Write the subject code only)