

## BHAKTA KAVI NARSINH MEHTA UNIVERSITY - JUNAGADH

Examination Form : B.	*Sr. No of Application:					
*College Name : CCSIT -	Junagadh		De nette Pare	814.5V)	fanjduč	test's firest
*Faculty Name : SCIENC *Program Name : B.Sc.(N		ester - 5				Affix Here
*Student PID/ Enrollment No:						Passport Size recent
*Surname:	Agg) anuny [ ]					Photograph
*Name:	2 (alabibra)					1990
*Father/Husband Name:	Lets bibnes extrabi	ai of the College at Whi	nton Princip	ed bonole	or Leading	Uspillen)
*Sex	○ Male ○ Female	Category: OSC OST OSEBC OTHER			PH OY N	
*Residential Address :	mes minimo ynangaria.	Facility of the edition must	salang mis	nino) noqu	A som	nistra arti - 1
*Local Address :		were self to Present Lea	min Innenny o	d nominan	oo ym i	cert primari
Exam Type :	O Whole O Part	*Answering Language:	O Gujarati			
*Mobile No :		Email Address :				
To be filled by the College.						
*Sr. No. Of Applicant :	in bolomic militaria		College Code :		3108021	
Center Code :			Appearing in :			Albadie
STUDENT PID:			Enrollment Date :			
Eligibility Certi. No :	III per tre tues of	smille distributed allema	Eligibility Do	ite:	distant la	off who will be
Details Of Previous Exam:	Attach Mark shee	ts of previous Exams				
Exam:				Year:		
Seat No :				Result :		

## I have to appear in the following subjects.

Semester- V					
SrNo. Code		Paper	Tick Appearing Subject(√)		
1	BSCiamCC5010	Immunology & Medical Microbiology			
2	BSCpmeCC5020	Prokaryotic Metabolism	vii a ig volarensis		
3	BSCmbeCC5030	Molecular Biology & Bio Engineering	of a later uning		
4	BSCiamPR5010	Immunology & Medical Microbiology (Practical)			
5	BSCpmePR5020	Prokaryotic Metabolism (Practical)			
6	BSCmbePR5030	Molecular Biology & Bio Engineering (Practical)	policiers distort		
7					
8					
9			urge Cost a administration		
10					

Whenever there is online entry, Please ensure to enter complete and correct details.

## **EXAMINATION PARTICULARS**

I request exemption from the following Subject/s as I have obtained necessary marks for Examination in the Subject/s concerned i.e. 40% or marks as prescribed for time to time in subject/s held in the year mentioned against them. An attested copy of Mark sheet is attached herewith.

Month & Year	Subject	Marks Obtained	Seat No.	University	Center	Result
					301/042	
- Autom				Lipsteama2 (w	elettereltit at	
Tepar						
Inspersion						
Place: Date:		_			Yours faithfully ndidate's Signatur	e:
Certific	ate to be sig	ined by the Principa	l of the Colleg	e at which the ca	andidate has stu	udied
certify that Shreattending	ee/Smt./Kim	day out of		days.	has kept one te	erm in my college b
		ort for the respective to				time period.
		the best of my Know		The state of the s	The second secon	
		ission to present hims				
		has during this/previo				
		ng the academic year member of the Univer				
	Contract of the second	s/National Service Sc	The second secon	it sports team or	Theranc is a men	inder or the
		statements of the car		ng EXEMPTION of	laimed at the ex	amination in a
	T	are correct and eligit	The state of the s	The state of the s		
subjects						
5. I certify	that he/she is	s eligible to appear fo	r the respective	exams as per the	e rules of the uni	versity.
Place:						
Date:		15001			Principal S	ignature
* Mandato	ry fields.					
		Ex	caminee Assur	rance		
1. I shall not	bring any kind o	of written material or writter			ited to exam (anywhe	ere) on any object in th
examination	on hall during the	e time of examination. er examinees, and shall ne		Ø 185	2, 2	
the exami	nation hall during	g the time of examination.		message or would not	misbenave which ca	an create disturbance i
3. I shall not	indulge in any a	ct of misbehavior in the ex n supplementary written	amination hall.	hoots given to me u	shile I leave the eve	amination hall after th
examination	on gets over, n	nor shall I indulge in any	such activity whi	ch would lead to att	tempting the examin	nation from outside th
	on hall. I am awa corted to the univ	are that such activities mig	ht lead to disciplina	ary action resulting in I	being expelled from t	he examination hall an
5. I am awar	e that I shall be	liable for punishment if I in			behave with the Juni	or Supervisor, or Senic
		niversity official on duty in t ance that I shall act in acco			regulations regarding	examination and would
be liable for	or any punishme	ent the University deems fit	for the violation of	the said rules and reg	ulation	
		ance that I shall follow all the ligible to appear for the re				xamination.
Examinee						
	's Signature		College Seal		Principal'	s Signature and Stamp
	's Signature		College Seal		Principal'	s Signature and Stamp