



The Sanskrit College and University

1, Bankim Chatterjee Street, Kolkata - 700073 | ☎ - (033) 2241 - 3611 / 1906
[Established by the Act XXXIII of 2015; Vide WB Govt. Notification No 187-L Dated- 19.02.2016]
<https://www.sanskritcollegeanduniversity.ac.in>
FORM - I (SPECIAL EXAMINATION)

P.G – 2nd SEMESTER SPECIAL EXAMINATION APPLICATION FORM-2023

| |
|--|
| Paste your passport Size photograph |
|--|

TWO YEAR DEGREE COURSE

(Applicable for students that have appeared at the PG final semester examination)

| | |
|---|--|
| NAME OF THE CANDIDATE (Block Letter) | |
| GENDER | |
| CATEGORY | |
| SUBJECT/COURSE/ACADEMIC PROGRAMME | |
| DEGREE LEVEL with SMESTER | |
| UNIVERSITY REGISTRATION NO. | |
| UNIVERSITY EXAMINATION ROLL NO. | |
| ADDRESS FOR CORRESPONDENCE | |
| MOBILE NO. | |
| ALTERNATIVE PHONE NO. | |
| E-MAIL ID | |

- Course Codes and Course Titles in the _____ Semester Examination, 2023 in which I may be permitted to appear in the concerned semester examination have been mentioned in the following page: -

P.T.O →



The Sanskrit College and University

1, Bankim Chatterjee Street, Kolkata - 700073 | ☎ - (033) 2241 - 3611 / 1906
[Established by the Act XXXIII of 2015; Vide WB Govt. Notification No 187-L Dated- 19.02.2016]
<https://www.sanskritcollegeanduniversity.ac.in>

FORM - I (SPECIAL EXAMINATION)

| Sl. No. | Course Code | Course Title |
|---------|-------------|--------------|
| 1. | | |
| 2. | | |
| 3. | | |

I hereby declare that if any of the statements made in the application be found to be not true or if it appears that in the opinion of the University, I had in any way contravened the provisions of the University Rules and regulations relating to the Examination, my application for appearing in the Examination will be liable to be cancelled by the University.

Date: ___ / ___ / ___

(Signature of the Student)

I do hereby declare to pay Rs. 600/- as examination related Fees before appearing in the Special Examinations as had been notified by this University within the stipulated time period.

Date: ___ / ___ / ___

(Signature of the Student)