



END TERM EXAMINATION FORM
 (All particular to be filled in by the student in Block Letters)

Affix
 Photograph
 to be
 attested

University Roll No: _____
 Name of Program/ Branch : _____ Batch: _____
 Examination Month _____ year _____
 Name of the Candidate: _____
 Mother's Name: _____ Father's Name: _____
 Name of Institute: _____

Have you ever been disqualified in Examination yes/ No If yes, give details: _____

| Semester | Code / Subject (s) Name | Semester | Code / Subject (s) Name |
|----------|-------------------------|----------|-------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Contact no. of the candidate: _____
 Permanent address of the candidate: _____

| | |
|--|--|
| In case of any discrepancy filled in by me in the admission form. I shall be responsible for the consequences I have given through the syllabus and Regulations of the Exam and understand the same for my eligibility for the same Exam(s). Signature of the Candidate _____ Date _____ | This is to certify that the candidate has completed the prescribed course of studies had fulfilled all the conditions mentioned in the Regulation for the conduct of Exam and is eligible to appear in the Exam as a Candidate of RIMT UNIVERSITY. The candidate(s) bear a good moral character and all above particulars filled by him/her are correct as per available record. |
|--|--|

*Last Date of the Submission of Form is 20th October in Examination Department RIMTU.

* A fine of Rs. 250 will be charged for the Submission of Form after due date.

Verified by:(Superintendent Student Section RIMTU)

Signature of the Dean (School)/ Head of Department
 (With Date & Seal)

_____ cut from here _____



ADMIT CARD (END TERM EXAMS)

All particulars are to be filled by the students in Block Letters with neat hand writing

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 to be
 attested

University Roll No: _____ Name of the Candidate: _____
 Mother's Name: _____ Father's Name _____
 Branch/Program: _____ Batch: _____
 Examination: Month & Year: _____ Examination Centre: _____

| Semester | Code / Subject (s) Name | Semester | Code / Subject (s) Name |
|----------|-------------------------|----------|-------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(Sig. of Candidate)

Verified by:(Superintendent Student Section RIMTU)

Sig. Controller of Examinations