Form No.

## VNSGU SOUTH GUJARAT UNIVERSITY, SURAT.

Udhna-Magdalla Road, SURAT-395 007 (Gujarat) India Tel. : +91-261-2227141 to 46

INTERNET COPY

Serial No. (to be given by college)

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1. Name of Ap	plicant								- 1
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Reg./E	nrollment No. :								
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2. Examinati	on Information								= 3
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	No	Name of Examination	Number of Attempts	Month & Year of Last Attempts	Seat Number of Last Attempts	Subject Code (s) Not yet Cleared
	1	First Year / 1st Semester		il sprini		
	2	Second Year / 2nd Semester				
	3	Third Year / 3rd Semester				
	4	Fourth Year / 4th Semester				
	5	5th Semester				
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,	9 10	9th Semester  10th Semester			Sign	oture of Candidate
Date	10				Signa	ature of Candidate
Date	10		— For	Office Use On		ature of Candidate
	10		— For	240		ature of Candidate
Name	10	10th Semester	— For	240	ly	ature of Candidate

College Stamp

Signatue of Head/Principal/ Proffessor in Charge

3. Previous Year Record

Signature of Vetifier

. Date