

Saurashtra University

Re-Accredited Grade A by NAAC

Examination Form D.M.L.T.			
*College Name :		* Sr. No Of Applicant:	
*Faculty Name :			
*Program Name :			
*Enrollment No:			Affix Here
*Surname:			Passport
* NAME:			size recent
*Fathau/Huahau d Nasaa			Photograph
*Father/Husband Name:			
*SEX:	○ Male ○ Female	Category: ○ SC ○ ST○ SEBC ○ OTH	HER PH OY ON
*Residential Address :		*Local Address :	
Exam Type :	O Whole O Part	*Answering Language :	○ Gujarati○ English ○Hindi
*Mobile No :		Email Address :	
To be filled by the College.		4 (1)	
*Sr. No. Of Applicant :	D	College Code:	
Centre Code :	16	Appearing In :	
Enrollment No :	29	Enrollment Date :	
Eligibility Certi. No :	17/00	Eligibility Certi Date :	
Details Of Previous Exam Attach Marksheets of all previous Exams			
Exam:		Year:	
Seat No. :		Result :	

I have to appear in the following subjects.

D.M.L.T.			
Sr. No.	Course Code	Title of Course	Tick Appearing Subject (√)
1	Core	GENERAL INTRODUCTION BIO-CHEMISTRY	
2	Core	HAEMATOLOGY IMMUNOHALMATOLOGY BLOOD	
3	Core	GEN. MICRO BIO. MEDICAL MICR. SEROLOGY	
4	Core	URINE ANALYSIS EXAMINATION OF BODY FLUID	

3. 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 more marks in Compulsory English and 44% or more in other subjects / held in the year mentioned against them. An attested copy of Marksheet is attached herewith.

in the y	ear men	tioned agains	st them. An atteste	d copy of Mark	sheet is attached	herewith.	
Month		Subject	Marks Obtained	Seat No.	University	Centre	Result
Place :						You	urs faithfully
Date : _							
						Cand	idate's Signature
	Certi	ficate to be	signed by the Princ	ipal of the Coll	ege at which the	candidate has	studied
l ce							
ter	m in my c	college by atte	mending	day	s out of	days	·
1.	The attend	dance report fo	r the respective term w	vill be sent to the	University by 20 th Ma	arch,201	
			ne best of my knowledg				at is he/she has my
	•	•	nself/herself at the ens	•		• •	
			as during this/previous				
			he/she has satisfactory				
			larly taken part in athle	The second secon		•	•
		•	ns OR (iii) he/she is a r training (1) on medica			•	•
	University		training (1) on medica	i giounus as per	rules in force on (2	.) On other ground	is laid down by the
	•		ements of the candidate	te regarding EXEM	MPTION claimed at th	ne examination in a	a subject/s as above
		•	for the exemption and	The second secon			,,
5.	I certify th	at he/she is eli	gible t <mark>o appear for the </mark>	respective exams	as per the <mark>rules of</mark> th	ne university.	
Plac	ce :		D	(Signati	ure)		
			The state of the s	The same of the sa			-

To be struck off where it is not applicable.

Date :

+ Write your name in English in correct spelling. The spelling of the name written here shall be as per University records and no change therein can be made afterwords. Please attach an attested copy of the statements of marks in supports of exemption claimed and passing the previous Examination.

Principal

College

Insert one of the centers announced by the University for this examination. Centre change is not allowed.

Examinee Assurance

- 1. I shall not bring any kind of written material or written notes and would not write anything related to exam (anywhere) on any object in the examination hall during the time of examination.
- 2. I shall not converse to other examinees, and shall not try to send any message or would not misbehave which can create disturbance in the examination hall during the time of examination.
- 3. I shall not indulge in any act of misbehavior in the examination hall.
- 4. I shall not carry the main supplementary written or blank answer sheets given to me while I leave the examination hall after the examination gets over, nor shall I indulge in any such activity which would lead to attempting the examination from outside the examination hall. I am aware that such activities might lead to disciplinary actions resulting in being expelled from the examination hall and getting reported to the university.
- I am aware that I shall be liable for punishment if I indulge in any undesirable activity or misbehave with the Junior Supervisor, or Senior Supervisor or any other University official on duty in the examination hall.
- 6. I hereby furnish the assurance that I shall act in accordance with all the University rules and regulations regarding examination and would be liable for any punishment the University deems fit for the violation of the said rules and regulations.
- 7. I hereby furnish the assurance that I shall follow all the instructions given on the answer sheet during the time of examination.
- 8. I hereby assure that I am eligible to appear for the respective exam as per rules of the university.

Examinee's Signature	2	Principal's Signature and Stamp