



KRISHNA KANTA HANDIQUI STATE OPEN UNIVERSITY

DEGREE EXAMINATION: BCA (1ST. SEMESTER)

SESSION _____

Form No.Ex-14

NAME OF THE STUDY CENTRE :

1. Enrolment Number : (as in enrolment certificate)

2. Name of the Candidate : (in BLOCK letters as per HSLC/BPP enrolment certificate)

First Name

Middle Name

Last Name

Passport size
photograph
to be
pasted

☺
Full signature of
the Candidate

3. Father's Name : (in BLOCK letters only)

4. Mother's Name : (in BLOCK letters only)

5. Address for Communication :

Pin : _____

Contact Telephone. No. _____

6. Caste (✓): General ; SC ; ST (Plain) ; ST (Hills) ; OBC/MOBC

7. Sex : Male ; Female

8. Examination Passed: : BPP ; HS (Arts/Commerce/Science)

(Enclose photocopy of Marksheet)

To,

**The Controller of Examinations
K.K. Handiqui State Open University
Housefed Complex, Dispur,
Guwahati-6**

Sir,

I, hereby present myself as a candidate for the ensuing Degree Examination
1ST.SEMESTER BCA 20..... of Krishna Kanta Handiqui State Open University.

If any of the statements made and particulars furnished in the application is found to be not true or if it appears that in the opinion of the University, I have contravened any of the provisions of the rules and regulations of the University relating to the Degree examination, my admission to the Examination will be liable to be cancelled.

The fees shown hereunder are forwarded herewith --

i)	Examination Fee	:	Rs.	450/-
ii)	Marksheet Fee	:	Rs.	50/-
iii)	Practical Exam Fee	:	Rs.	300/-
iv)	Centre Fee	:	Rs.	200/-

Total Rs. 1000/-

Yours obediently

Date :

(Full signature of the candidate)

CO-ORDINATOR'S CERTIFICATE

I certify that the candidate named above is a duly enrolled student in Degree programme
(_____Course)of this Study Centre and that --

1. He/she has completed the requirements to appear in Degree Examination.
2. His/her conduct has been good.
3. He/she has filled in the particulars himself/herself and put his/her signature in the application in my presence and I believe the subjoined accounts are true.
4. I know nothing against his/her moral character.
5. He/she has not availed of more than 4 chances of appearing in Examination.

Date :

Seal

Signature

Name :

Accepted/ Not accepted

Co-ordinator

OSD (Examination)