

17/15/2231
20/01/15

CHAUDHARY DEVI LAL UNIVERSITY, SIRSA

(Established by the State Legislature Act 9 of 2003)

Approved under Section 2(f) and 12(B) of UGC Act, 1956



No. Results/2015/ 294
Dated 19-01-15

To

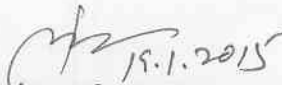
The Incharge,
University Website,
C.D.L.U., Sirsa.

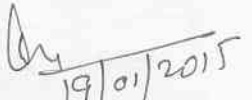
Sub: Upload the Examination Form.

Madam,

Please find enclosed herewith the revised examination forms and the same may kindly be requested to upload on the University Website for the convenience of the students.

This is for your kind information and further necessary action, please.


19.1.2015
Superintendent (R-I)


19/01/2015
Superintendent (R-II)

14. The Reappear candidate must fill up the columns for each availed chance.
(i) Information of Lower/Higher Examination/Reappear result of the same class.

Name of Exam	Chance availed	Year & Session	Roll No.	Result	University

15. Are you appearing in any other examination from this University or any other University simultaneously. Write 'Yes' or 'No' in the box

16. If answer to Item No. 15 is 'Yes' write Particulars of all such exam. below.

Name of Class	University / Board	Subject in which to appear	Full Subjects/Re-appear / Improvement/Additional

17. Have you ever been disqualified in any exam. or any UMC Registered against you, if yes, give detail.

University / Board	Examination	Year & Session	Roll No.	Punishment

18. University Fee Receipt No./Bank Draft No.Dated.....Amount.....

19. For Improvement candidates only

- (i) Session & Roll No. for passing final Examination Final
(ii) Chance availed Previous

Class	Session	Roll No.

DECLARATION

I solemnly declare that the particulars filled in by me in the above columns are correct and nothing has been concealed therein. In case of any discrepancy/concealment found therein, I shall be responsible for the consequences.

Dated :
Place :

Signature of the Candidate

ATTESTATION

(Certificate to be signed by the attesting authority)

1. I Certify that.....S/o. D/o. Shri.....is a regular student of this Dept./College and the particulars mentioned in the form have been checked and found in order, Further certified that the Dept./College is authorised to run the course / subject and the admission of the candidate is within the sanctioned strength. The Candidate bears good moral character.

Signature of the Chairperson/Principal
(With Seal)

2. I Certify that.....S/o. D/o. Shri.....appeared in.....under Roll No.....and failed/placed under Re-appear/passed.

3. He/She bears a goods moral character and has signed this form in my presence.
Note : Attestation on behalf of the Attesting officer is not acceptable.

Full Name of the Attesting Officer
Designation & Full Address of attesting authority

Signature of Attesting Authority
(With Seal)

Place : Dated :

Remarks By University Regarding Eligibility

Eligibility Checked from Result-sheet/Gazette/Original Documents (Please Tick Mark) as under :-
Eligible Not Eligible

i) Name of Exam/Session.....ii) Roll No.....
iii) Result.....
Eligible subject to Production of.....

i) Name of Exam/Session.....ii) Roll No.....
iii) Result.....
Not Eligible with reason.....

Clerk Assistant Superintendent (Final Order) Clerk Asstt. Supt. Asstt./Dy. Registrar



Chaudhary Devi Lal University, Sirsa

INFORMATION FOR COMPUTER USAGE
TO BE FILLED IN ENGLISH (Block Letters by Ballpen Only)

REGN. No.

Roll No.

Affix unattested photograph

Signature of the Student

1. Name of Examination Exam Code

2. Name of Dept./College Dept. / College Code

3. Appearing in Category: Full (F) / Reappear (R) / Additional (A) / Improvement (I) F R A I

4. Examination Centre

5. Name of Student

6. Father's Name Shri

7. Mother's Name Smt.

8. Correspondence Address

Pin Code Contact No.

9. Sex Code M F

10. College Roll No.

11. OBC / BC / SC / ST / General (GE)

12. Physically Challenged (PC) or Blind (BL)

13. Papers Codes in which appearing

14. Medium E H Previous Roll No.

15. Previous Exam held

16. RESULT

17. Signature of the Candidate

Signature of the Attesting Authority (With Seal)

(For Office Use Only)

18. Diary No.....

19. Amount Received.....

Date.....

University Receipt

No.....Dt.....

20. Checked by University Officials



Chaudhary Devi Lal University, Sirsa Provisional Roll No. Slip

Regn. No

Roll No

(To be assigned by the Office)

1. Name of Exam.....
2. Name of Candidate.....
3. Father's Name Shri.....
4. Mother's Name Smt.....
5. Centre of Exam..... Centre No.....
6. Paper(s) in which appearing
1..... 2..... 3.....
4..... 5..... 6.....
7..... 8..... 9.....
10..... 11..... 12.....

Space for latest
Photograph
(attested by the
attesting authority)

6. Signature of the Candidate..... Controller of Examinations.....
(The candidate must sign. here before submitting this form to the University)

Chaudhary Devi Lal University, Sirsa (For Centre Superintendent)

Regn. No

Roll No

(To be assigned by the Office)

1. Name of Exam.....
2. Name of Candidate.....
3. Father's Name Shri.....
4. Mother's Name Smt.....
5. Centre of Exam..... Centre No.....
6. Paper(s) in which appearing
1..... 2..... 3.....
4..... 5..... 6.....
7..... 8..... 9.....
10..... 11..... 12.....

Space for latest
Photograph
(attested by the
attesting authority)

6. Signature of the Candidate..... Controller of Examinations.....
(The candidate must sign. here before submitting this form to the University)

TO BE FILLED IN BY THE CANDIDATE

Address for Correspondence
Exam.....Roll No.....
Name.....
Address.....
Contact No.....Pin.....

Address for Correspondence
Exam.....Roll No.....
Name.....
Address.....
Contact No.....Pin.....

Address for Correspondence
Exam.....Roll No.....
Name.....
Address.....
Contact No.....Pin.....

Address for Correspondence
Exam.....Roll No.....
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Address.....
Contact No.....Pin.....