



# NETAJI SUBHAS OPEN UNIVERSITY

[ UG ]  
20/H-04/02352



To  
The Controller of Examinations  
NETAJI SUBHAS OPEN UNIVERSITY  
134/1, Meghnad Saha Sarani  
Kolkata - 700 029

*Jaminur molla*

Sir/Madam,  
I would like to apply for Examination stated below. I satisfy all the conditions for this purpose under the Regulations. I undertake that I shall abide by the decision, rules, and regulations of the University. Any wrong information/non-compliance will render my candidature liable to be cancelled at any stage of the Examinations as will be decided by the University. I have also read & understood the instructions printed in back page. Details are furnished below for your consideration.

Yours faithfully

Date: \_\_\_\_\_

\_\_\_\_\_  
Full Signature of the candidate

**U.G. TERM END EXAMINATION JUNE 2020**  
in **BACHELOR OF LIBRARY & INFORMATION SCIENCE. (BLIS)**

Subject **BLIS**

Study Centre Code : **H-04** ( DIROZIO MEMORIAL COLLEGE STUDY CENTRE )

Enrolment Number : **1820 7402 0994**

Mobile/Phone No. : **8101733648**

NAME : **JAMINUR MOLLA**

Father's/Mother's/Husband's/Gurdian's Name **AZIZEL MOLLA**

**Candidate is eligible to appear in the papers mentioned below for the Examination.**  
Please tick  to take up the intended papers.

Paper Code	Paper Name
4	<input type="checkbox"/> LIBRARY CATALOGING THEORY
6	<input type="checkbox"/> CLASSIFICATION PRACTICE
7	<input type="checkbox"/> CATALOGING PRACTICE

**Note: Without submission of Assignment Marks no candidate will be allowed to appear in Term-End Examination.**

The above Particulars have been verified and found correct

H-04/0001/1/3

\_\_\_\_\_  
Signature of the Co-ordinator with seal



# NETAJI SUBHAS OPEN UNIVERSITY

[ UG ]  
20/H-04/02353



Kousik Das

To  
The Controller of Examinations  
NETAJI SUBHAS OPEN UNIVERSITY  
134/1, Meghnad Saha Sarani  
Kolkata - 700 029

Sir/Madam,  
I would like to apply for Examination stated below. I satisfy all the conditions for this purpose under the Regulations. I undertake that I shall abide by the decision, rules, and regulations of the University. Any wrong information/non-compliance will render my candidature liable to be cancelled at any stage of the Examinations as will be decided by the University. I have also read & understood the instructions printed in back page. Details are furnished below for your consideration.

Yours faithfully

Date: \_\_\_\_\_

\_\_\_\_\_  
Full Signature of the candidate

**U.G. TERM END EXAMINATION JUNE 2020**  
in **BACHELOR OF LIBRARY & INFORMATION SCIENCE. (BLIS)**

Subject **BLIS**

Study Centre Code : **H-04** ( DIROZIO MEMORIAL COLLEGE STUDY CENTRE )

Enrolment Number : **1820 7402 0995**

Mobile/Phone No. : **9903023240**

NAME : **KOUSIK DAS**

Father's/Mother's/Husband's/Gurdian's Name **JATINDRANATH DAS**

**Candidate is eligible to appear in the papers mentioned below for the Examination.**  
Please tick  to take up the intended papers.

Paper Code	Paper Name
1	<input type="checkbox"/> LIBRARY AND SOCIETY
2	<input type="checkbox"/> LIBRARY MANAGEMENT
3	<input type="checkbox"/> LIBRARY CLASSIFICATION THEORY
4	<input type="checkbox"/> LIBRARY CATALOGING THEORY
5	<input type="checkbox"/> REFERENCE AND INFORMATION SERVICE
6	<input type="checkbox"/> CLASSIFICATION PRACTICE
7	<input type="checkbox"/> CATALOGING PRACTICE
8	<input type="checkbox"/> COMPUTER BASICS AND APPLICATION

**Note: Without submission of Assignment Marks no candidate will be allowed to appear in Term-End Examination.**

The above Particulars have been verified and found correct

H-04/0002/2/3

\_\_\_\_\_  
Signature of the Co-ordinator with seal



# NETAJI SUBHAS OPEN UNIVERSITY

[ UG ]  
20/H-04/02354



Somak Roy

To  
The Controller of Examinations  
NETAJI SUBHAS OPEN UNIVERSITY  
134/1, Meghnad Saha Sarani  
Kolkata - 700 029

Sir/Madam,  
I would like to apply for Examination stated below. I satisfy all the conditions for this purpose under the Regulations. I undertake that I shall abide by the decision, rules, and regulations of the University. Any wrong information/non-compliance will render my candidature liable to be cancelled at any stage of the Examinations as will be decided by the University. I have also read & understood the instructions printed in back page. Details are furnished below for your consideration.

Yours faithfully

Date: \_\_\_\_\_

Full Signature of the candidate

**U.G. TERM END EXAMINATION JUNE 2020**  
in **BACHELOR OF LIBRARY & INFORMATION SCIENCE. (BLIS)**

Subject **BLIS**

Study Centre Code : **H-04** ( DIROZIO MEMORIAL COLLEGE STUDY CENTRE )

Enrolment Number : **1820 7402 0997**

Mobile/Phone No. : **9804781966**

NAME : **SOMAK ROY**

Father's/Mother's/Husband's/Gurdian's Name **CHAKRADHARI ROY**

**Candidate is eligible to appear in the papers mentioned below for the Examination.**  
Please tick  to take up the intended papers.

Paper Code	Paper Name
1	<input type="checkbox"/> LIBRARY AND SOCIETY
2	<input type="checkbox"/> LIBRARY MANAGEMENT
3	<input type="checkbox"/> LIBRARY CLASSIFICATION THEORY
4	<input type="checkbox"/> LIBRARY CATALOGING THEORY
5	<input type="checkbox"/> REFERENCE AND INFORMATION SERVICE
6	<input type="checkbox"/> CLASSIFICATION PRACTICE
7	<input type="checkbox"/> CATALOGING PRACTICE
8	<input type="checkbox"/> COMPUTER BASICS AND APPLICATION

**Note: Without submission of Assignment Marks no candidate will be allowed to appear in Term-End Examination.**

The above Particulars have been verified and found correct

H-04/0003/3/3

Signature of the Co-ordinator with seal