



NETAJI SUBHAS OPEN UNIVERSITY

[UG]
20/H-10/02485



Piu Ghosh

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-10** (**SOUTH CALCUTTA GIRLS' COLLEGE STUDY CENTRE**)

Enrolment Number : **1820 8002 1036**

Mobile/Phone No. : **8017086406**

NAME : **PIU GHOSH**

Father's/Mother's/Husband's/Gurdian's Name **BIJAN GHOSH**

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
3	<input type="checkbox"/> LIBRARY CLASSIFICATION THEORY
6	<input type="checkbox"/> CLASSIFICATION 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

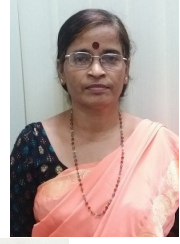
H-10/0001/1/3

Signature of the Co-ordinator with seal



NETAJI SUBHAS OPEN UNIVERSITY

[UG]
20/H-10/02486



Aparna Banerjee

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-10** (SOUTH CALCUTTA GIRLS' COLLEGE STUDY CENTRE)

Enrolment Number : **1720 8002 1067**

Mobile/Phone No. : **9903219054**

NAME : **APARNA BANERJEE**

Father's/Mother's/Husband's/Gurdian's Name **ANIL KUMAR MUKHERJEE**

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
6	<input type="checkbox"/> CLASSIFICATION 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-10/0002/2/3

Signature of the Co-ordinator with seal



NETAJI SUBHAS OPEN UNIVERSITY

[UG]
20/H-10/02487

PHOTO TO BE
AFFIXED HERE

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-10** (**SOUTH CALCUTTA GIRLS' COLLEGE STUDY CENTRE**)

Enrolment Number : **1720 8002 1068**

Mobile/Phone No. : **9433279838**

NAME : **SRIKANTA DAS**

Father's/Mother's/Husband's/Gurdian's Name **LATE GOURHARI 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
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-10/0003/3/3

Signature of the Co-ordinator with seal