



# NETAJI SUBHAS OPEN UNIVERSITY

Form No.....

Please read the Instruction overleaf before filling up the form.

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

Attach  
two recent  
passport size  
photograph

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)

Programme of Study

Part/Semester/Term-End Examination

Elective Subject Sex  M  F

Study Centre Code Examination Centre Code

Enrolment Number

Date of Payment for 2<sup>nd</sup> yr./3<sup>rd</sup> yr. Renewal

DD	MM	YEAR

NAME

(In Block Letter)

Father's/Mother's/Husband's/Guardian's Name

Relationship with Guardian

Address

Contact No Telephone Mobile

Details of complete paper title and correct paper number intended to be taken up in the examination. (Please mention subsidiary subject code and title if any)

SERIAL	PAPER CODE NUMBER	COURSE/PAPER TITLE
01		
02		
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The above particulars have been verified and found correct

Signature of the Co-ordinator with seal