



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 2nd yr./3rd yr. Renewal

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 |
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| 01 | | |
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The above particulars have been verified and found correct

Signature of the Co-ordinator with seal