



**SCHOOL OF COMPUTER SCIENCE & IT
DEVI AHILYA VISHWAVIDYALAYA, INDORE**



SEMESTER EXAMINATION SESSION (TICK): EVEN (JAN-MAY)/ODD (JUL-DEC) YEAR: 20__

COURSE: _____ SEMESTER: _____ (TICK)(REGULAR / ATKKT)

1. ROLL NO. _____ 2. ENROLLMENT NO. _____

3. STUDENT'S NAME: _____

4. FATHER'S NAME: _____

5. MOTHER'S NAME: _____

6. LOCAL ADDRESS: _____

7. TELEPHONE NO. _____

STUDENT'S SIGNATURE

8. PERMANENT ADDRESS: _____

9. MOBILE NO. _____



SUBJECTS NAME	DATE	SIGNATURE		NAME OF INVIGILATOR
		STUDENT	INVIGILATOR	

AUTHORISED SIGNATORY

NOTE: PLEASE ATTATCH THE STUDENT COPY OF FEES RECEIPT

-----CUT HERE-----CUT HERE-----CUT HERE-----



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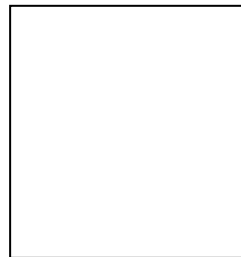
ADMIT-CARD

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