



INDIAN EXCELLENCE

INSTITUTE OF INFORMATION & TECHNOLOGY

An Autonomous Institution | Registered Under Micro, Small & Medium Enterprises (Govt. of India) | An ISO 9001:2015 Certified Institute
Fully Accredited By International Accreditation Organization (USA) | Affiliated By International Accreditation Forum | Registered Under Labour Department Act, 1958

EXAMINATION FORM

1. Examination for which appearing..... Annual Semester System
Session : January April July October
 Full Papers Improvement Addl. Paper Compartment

2. Enrollment No.

3. Name of Student

4. Father's Name

5. Mother's Name

6. Gender Male Female Other 7. DOB

8. Contact No. 9. E-mail

10. Category to which belong : General SC ST OBC P.H.

11. Name and Place of Examination Centre _____

12. Particulars of previous examination(s) on the basis of which applying for the present examination and proof be attached. The Re-appear/Compartment student must fill up the columns for each availed chance session wise.

Mention the opted subjects below for the examination.

Course Code	Year	Session	Subject	Mode (online/offline)

Date :

Controller of Examination

Signature of Candidate