

Downloaded Form

INSTITUTE OF DISTANCE EDUCATION IDE Rajiv Gandhi University RONO HILLS : ITANAGAR



Paste a recent passport size photograph duly signed & attested

Examination Form

ERN..... University Roll No.

ClassYear

(To be filled in by the Candidate)

A. Name of the Examination :

B.

Centre of Examination :

(Give your choice in order)

C. Particulars of the Candidate:

i) Name (in capital) :

ii) Father's/Husband's name :

(in capital)

iii) Category SC/ST/Genl/OBC :

iv) Sex: Male/Female :

v) Registration No. :

D. Subjects (paper) offered for the Examination (with option, if any) :

I. Compulsory (Specify old/new course)

1..... 2.....

II. Elective Subjects Paper no. Title of the paper

Table with 3 columns: Elective Subjects, Paper no., Title of the paper. Rows 1-4.

E. Whether attended contact programme Yes/No

F. Have you submitted assignments? Yes/No

(i) If Yes, furnish the marks obtained in

ACKNOWLEDGMENT

Received admission form No. of BA I/II/III Year/CCFT/CCEC

from Mr/Ms on

Sign. of Receiver

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G. Special information (Strike out which are not applicable)

(i) Whether appearing simultaneously in lower examination: Yes/No

If yes, (a) Examination : _____ (b) (Paper - I) _____

II) _____ III) _____ IV) _____

(ii) Whether appeared in this examination earlier : Yes/No

If yes, University Roll No. : _____ Year _____

H. Particulars of the previous Examination Passed :

Examination	Year/ Session	Roll No.	University/ Board	Total Marks Obtained
P.U./Class XII or any equivalent examination				
B.A. I Yr. (Pass)				
B.A. II Yr. (Pass)				

Note : 1. *Attested photocopy of marksheet of lower qualifying examination should be attached along with this form.*
2. *Incomplete forms in any regard will be summarily rejected*

I Solemn Declaration

- (i) I have filled in the forms in my own hand after careful study of the University rules and regulations pertaining to the year and session of this Examination.
- (ii) The statements made by me in the form are correct and true.
- (iii) I accept liability for action under the rules and regulations of the University for any wrong statement or concealment of facts.

Date _____

Signature of the Candidate

Permanent Address

Address for Correspondence

Certified that the candidate is eligible for appearing in the examination he/she has applied for according to the eligibility criteria of Distance Education Programme.

Director