

Last Date: 03.11.2017

Registration No.

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St. PETER'S UNIVERSITY

St. Peter's Institute of Higher Education and Research
(Declared under section 3 of the UGC Act 1956)
Avadi, Chennai – 600 054.

END ASSESSMENT, NOVEMBER / DECEMBER -2017

M.A. / M.Com. / M.Sc.
(On -Campus Programme)
(2016-17 Batch)

PHOTO

EXAMINATION APPLICATION FORM

Branch: _____

-
1. Name in BLOCK LETTERS : _____
(as in the certificate in English)
 2. Gender : Male/Female
 3. Date of Birth : _____
 4. Nationality : _____
 5. Community : BC / MBC / SC / ST / Others
 6. Father's Name : _____
 7. Mother's Name : _____
 8. Blood Group : _____
 9. Aadhaar No : _____
 10. (a) Present Address with pin code : _____
(in BLOCK LETTERS)

PIN: _____
 - (b) Permanent Address with pin code : _____
(in BLOCK LETTERS)

PIN: _____
 - (c) Telephone No. : _____

P.T.O

11. Particulars of Educational qualification:

Qualifications	Board/College/ University	Month and year of passing	Reg. No.	Average marks /Class

Note: Copies of the certificates and Transfer Certificate are to be enclosed.

12. (a) No. of papers in the End Assessment :

Semester	No. of Papers	
	Theory	Practical
All the papers in III Semester		
Arrear papers in II Semester		
Arrear papers in I Semester		

(b) Total amount of End Assessment Fee:

	Amount (Rs.)
II Semester (Arrear)*	
I Semester (Arrear)*	
Total	

(c) Date of Payment of Arrear Examination:
(Enclose a copy of the challan)

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13. Whether II year Tuition fee is paid. Yes / No
(If yes, enclose a copy of the challan)

I certify that all the above particulars given by me are correct.

Date:

Signature of the Student

S.No.	Particulars of Fee	Name of the Programme
		PG (Rs.)
1.	Cost of Application	30
2.	Statement of Marks	50
3.	Theory (Per Subject)	130
4.	Practical (Per Subject)	180
5.	Project	500

SIGNATURE OF HOD (With Seal)

Note: The filled-in application is to be submitted to the Controller of Examination through the HOD concerned.