

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

B.A. / B.Com. / B.Sc. / B.B.A. / B.C.A.

(On -Campus Programme)

(2017-18 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 I Semester		

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

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13. Whether I 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
		UG (Rs.)
1.	Cost of Application	30
2.	Statement of Marks	50
3.	Theory (Per Subject)	100
4.	Practical (Per Subject)	150
5.	project	250

SIGNATURE OF HOD (With Seal)

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