

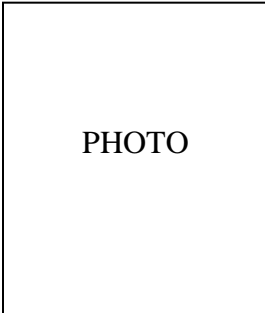
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St. PETER'S UNIVERSITY

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

END ASSESSMENT, MAY / JUNE 2016

M.Phil
(2015-16 Batch)



EXAMINATION APPLICATION FORM

Branch: _____

1. Name in BLOCK LETTERS : _____
(as in the School Certificate in English)

2. Gender : Male/Female

3. Date of Birth : _____
(In Christian Era as in School Certificate)

4. Nationality : _____

5. (a) Social Status : OBC / SC / ST / Others

(b) Community : _____

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. : _____

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 / Dissertation
Dissertation	

(b) Total amount of End Assessment Fee :

	Amount (Rs.)
Dissertation in II Semester	
Total	

(c) Particulars of Examinations Fee :

Challan No. :
Bank/Date :
(Enclose a copy of the Challan) :

13. Whether II Semester 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

SIGNATURE OF HoD (With Seal)

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