Examination Form   **BCOM SEM-5 (2016) March-2023**   Academic Year: 2022-2023

General Details:

Enrollment No: **0021011**

Surname: _____

Name: _____

Father's/ _____

Latest Photo

Gender: Male / Female

Applied for Degree   No   Category: GEN/SEBC/SC/ST

Residential Address _____   Local Address _____

Exam Type : Whole   Answering Language GUJARATI

Current Mobile No [____]   VALI Mobile No [____]

Roll Number: [____]   College Code: 19001

Centre Code : 19/19001/Limbdi   Appearing In: BCOM SEM-6 (2016)

Enrollment No: **0021011**

Eligibility Certificate No : 0   Eligibility Certificate Date : N.A.

Details of previous Exam: છેલ્લે આપેલ પરીક્ષાની વિગતો લખો.

Exam :   Commerce   Year/Sem: -20

Seat No :   Result   Pass / Fail . %

Details of Courses: મારે આપવાના થતા વિષયોની માહિતી નીચે મુજબ છે.

Course Group   Course Name

1.
2.
3.
4.
5.
6.
7.

☑ I give my consent (સંમતિ) to keep above residential address, mobile number and rules and regulation of Saurashtra University, Rajkot & Sakhida College Limbdi and degree form purpose.

Principal

✗..
Student Sign

Print By: 19001   Page:01

તા.૨૩/૦૩/૨૦૨૩ના રોજ કોલેજ વેબસાઇટમાં હોલ ટીકીટ લીસ્ટમાં તમારુ નામ અને વિષયો તમારે ફરજયાત તપાસી લેવાની સુચના આપવામાં આવે છે.

Saurashtra University   Exam Form Receipt

Student Name_____

Received Exam Fee Cash Rs._____ /- Date : / /2023 Exam: BCOM Sem-5 (2016)

Sakhida College Cashier Signature: