

## Saurashtra University

Examination Department

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Examination Form <b>BA SEM-5</b> (2019)	O) October-2023 Academ	ic Year: 2023-2024
General Details:		
Enrollment No: <b>001201</b>		
Surname:		Latest Photo
Name:		
Father's/		
Gender: Male / Female		
Applied for Degree Yes Categorium	ory: GEN/SEBC/SC/ST	
Residential	Local Address	
Address		
Exam Type : Part	Answering Language GUJAKATI	
Current Mobile No	VALI Mobile No :	
Roll Number:	College Code: 19001	0)
Centre Code : 19/19001/Limbal	Appearing In: BA SEM- (201	.9)
Enrollment No: 001201		
	pility Certificate Date: N.A.	
Details of previous Exam: છેલ્લે આપેલ પરીક્ષાની વિગતો લખો.		
Exam: Arts	Year/Sem: -20	
Seat No:	Result Pass / Fail . %	• • • • • • • • • • • • • • • • • • • •
Details of Courses: મારે આપવાના થતા વિષયોની માહિતી નીચે મુજ	બ છે.	••••••
Course Group Course Hame		• • • • • • • • • • • • • • • • • • • •
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4.		
5.		
6.		
7.		
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I give my consent (સંમતિ) to keep above res	sidential address, mobile number and rules	s and regulation of
Saurashtra University, Rajkot & Sakhida College I		•
Ç, J		
<b>/</b>	Princip	al
Student Sign	•	
C		
Print By: 19001	Page:0	1
<b>તા.૨૭/૦૮/૨૦૨૩ના</b> રોજ કોલેજ વેબસાઇટમાં હોલ ટીકીટ લીસ્ટમાં	તમારૂ નામ અને વિષયો તમારે ફરજયાત તપાસી લેવાની ર	<u>ષુચના</u> આપવામાં આવે છે.
Saurashtra University	Exam Form Receip	t
Student Name	·	
Received Exam Fee Cash Rs. /- Da	te: / /2023 Exam: BA Sem-5 (20	019) Roll No.
Sakhida College Cashier Signature:		