



Saurashtra University
Accredited Grade "A" by NAAC (3rd Cycle)

Saurashtra University
Examination Department

REPEATER - 2016

4

Examination Form **BCOM SEM-1 (2016) OCT-2023** Academic Year: 2023-2024

General Details:

Enrollment No: **0021011**

Surname: _____

Name: _____

Father's/ _____

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

Last Exam Appearing In: B.COM. SEM-

Enrollment No: **0021011**

Eligibility Certificate No : 0

Eligibility Certificate Date : N.A.

Details of previous Exam: છેલ્લે આપેલ પરીક્ષાની વિગતો લખો.

Exam : B.COM. SEM-

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.
- 8.

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.

X _____
Student Sign

Principal

Print By: 19001

તા.૦૬/૧૧/૨૦૨૩ના રોજ કોલેજ વેબસાઈટમાં હોલ ટીકીટ લીસ્ટમાં તમારું નામ અને ઉપરોક્ત વિષયો તમારે ફરજિયાત તપાસી લેવા, ખાસ સુચના આપવામાં આવે છે.

Saurashtra University

Exam Form Receipt

Student Name _____

Received Exam Fee Cash Rs. _____ /- Date : /09/2023 Exam:BCOM Sem-1 (2016) Roll No. _____

Sakhida College Cashier Signature: _____