



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

Saurashtra University
Examination Department

ACCOUNTING

1

Examination Form **BCOM SEM-6 (2019) March-2024** Academic Year: 2023-2024

General Details:

Enrollment No: **00220121**

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 _____ Current Mobile No 2: _____

Roll Number: _____ College Code: 19001

Centre Code : T9/T9001/Limbdi Last Exam Appearing In: B.COM.SEM-5(2019)

Enrollment No: **00220121**

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

Details of previous Exam: છેલ્લે આપેલ પરીક્ષાની વિગતો લખો.

Exam : HSC Year/Sem: -20

Seat No : _____ Result Pass / ~~Fail~~ . %

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

Course Group _____ Course Name _____

- | | |
|-------------|-------------------------------------|
| 1. CORE | ENGLISH LANGUAGE-6 |
| 2. “ | INDIAN ECONOMY-2 |
| 3. “ | BUSINESS MATHEMATICS & STATISTICS-2 |
| 4. DSE-1 | AUDITING & CORPORATE GOVERNANCE-2 |
| 5. DSE-2 | HUMAN RESOURCE MANAGEMENT-2 |
| 6. DSE-3 | MANAGEMENT ACCOUNTING -2 |
| 7. ELECTIVE | ACCOUNTING-6 |

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 Roll Number _____

તા. ૧૮/૦૧/૨૦૨૪ના રોજ કોલેજ વેબસાઈટમાં હોલ ટીકીટ લીસ્ટમાં તમારું નામ અને વિષયો તમારે ફરજયાત તપાસી લેવા ખાસ સુચના આપવામાં આવે છે.

Saurashtra University

Exam Form Receipt

Student Name _____

Received Exam Fee Cash Rs. _____ /- Date : / /2024 Exam: BCOM Sem-6 (2019) Roll No. _____

Sakhida College Cashier Signature: _____