



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

Saurashtra University
Examination Department

REPEATER

2

Examination Form **BSC (HS) SEM-4 (2019) March-2024** Academic Year: 2023-2024

General Details:

Enrollment No: **007201**

Surname: _____

Name: _____

Father's/ _____

Gender: 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 : 19/19001/Limbdi

Appearing In: B.Sc.Home Science Sem-3

Enrollment No: **007201**

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.
2. “
3. “
4. “
5. “
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

Page:01

તા.૩૧/૦૧/૨૦૨૪ના રોજ કોલેજ વેબસાઇટમાં 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 : / /2024 Exam:BSCHOME Sem-4 (2019) Roll No. _____

Sakhida College Cashier Signature: