



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

Saurashtra University  
Examination Department

REPEATER - 2019

2

Examination Form **BCOM SEM-1 (2019) DEC-2024** Academic Year: 2024-2025

General Details:

Enrollment No: **002201**

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: **002201**

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.૩૦/૧૨/૨૦૨૪ના રોજ કોલેજ વેબસાઇટમાં હોલ ટીકીટ લીસ્ટમાં તમારું નામ અને ઉપરોક્ત વિષયો તમારે ફરજયાત તપાસી લેવા, ખાસ સુચના આપવામાં આવે છે.

Saurashtra University

Exam Form Receipt

Student Name \_\_\_\_\_

Received Exam Fee Cash Rs. \_\_\_\_\_ /- Date : /12/2024 Exam: BCOM Sem-1 (2019) Roll No. \_\_\_\_\_

Sakhida College Cashier Signature: \_\_\_\_\_