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

Saurashtra University
Examination Department

REPEATER
5

Examination Form **BCOM SEM-1 (2019) October-2026** Academic Year: 2026-27

General Details:

Latest Photo

Enrollment No: **0022012**

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 Appearing In: BCOM SEM-5 (2019)

Enrollment No: **002201**

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

Details of previous Exam: છેલ્લે આપેલ પરીક્ષાની વિગતો લખો.

Exam : Commerce 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.		

☑ 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.૨૪/૧૯/૨૦૨૬ના રોજ કોલેજ વેબસાઇટમાં હોલ ટીકીટ લીસ્ટમાં તમારૂ નામ અને વિષયો તમારે ફરજયાત તપાસી લેવાની સુચના આપવામાં આવે છે.

Saurashtra University Exam Form Receipt

Student Name _____

Received Exam Fee Cash Rs. /- Date : / /2026 Exam: BCOM Sem-1 (2019)

Sakhida College Cashier Signature: