## **KATHMANDU UNIVERSITY**

**OFFICE OF THE REGISTRAR** 

CHILLING CONTRACTOR		MIGGI				Photo	
		OMISSI	UN C	AKU			
				Examinat	tion Roll No		_
				Examinat	tion Centre		-
Universi	ty Registration No						
Name of	the student						
Name of	the School/College						_
	tion Year / Semester,						up
	Year / Semester				Year /	Semester	
	Number of Courses		Γ		Number of Cou	rses	
C.No.	Course Title	Cr.	F	C.No.	Course Titl		Cr.
			F				
			F				

Number of Courses								
C.No.	No. Course Title							

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C.No.= Course Number

Date \_\_\_\_\_

Controller of Examination

## KATHMANDU UNIVERSITY OFFICE OF THE REGISTRAR



Photo

Application form for regular/compartmental/GPA Make-up examination of 20..../20.....

University Registration No.																								
From S	Seria	l No	,											E	Exam	nina	tion	Roll	No	.: _				
School Code No.																								
														(Fo	r Of	ficia	ıl use	e on	ly)					
Full nar	ne in		ck l		s in 1	Engl	ish a	nd E	Devai	naga	ari Fii	rst							N	/lidd	le			
Date of	Birtl	n:				B.S.													A.	D.				
	Ye	ear			Mo	nth	D	ay							(ear					Mor		ay		
School	of _														Gen	der	: Ma	ıle ∟		Fema	le ∟	ther	s 🗀	
Level _													_ E	Bate	h _									
Departn	nent.																							-
Progran	n _																							_

## \_\_\_\_\_ Year / \_\_\_\_\_ Semester

Number of Courses								
C.No.	C.No. Course Title							
		Cr.						

\_\_\_\_\_ Year / \_\_\_\_\_ Semester

Number of Courses								
C. No.	C. No. Course Title							

If previously appeared in the above examination, mention

Year	Roll No	
Year	Roll No	
Year	Roll No	

Date \_\_\_\_\_

Full Signature of the Applicant

(To be filled by School/ College)

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Necessary fee enclosed Rs.

Attendance percentage \_\_\_\_\_

Verified by \_\_\_\_\_

Signature of the Dean/Principal

\_\_\_\_\_

Date: \_\_\_\_\_