

DIBRUGARH UNIVERSITY
DIBRUGARH
Application for Admission to the

_____ **Semester / Year** _____ **Examination, Year** _____

To,

The Controller of Examinations,
Dibrugarh University, Dibrugarh

Sir,

I request admission to the _____ Semester _____ Examination 20__ in _____ of your University as a Regular / Non-Collegiate candidate. Necessary particulars are as details below:

1. Name in full : _____
2. University registration No: _____ of _____ of DU
3. Fathers / Guardians Name : _____
4. Home address: _____
5. Address for communication: _____
6. Email id: _____ Phone No: _____
7. Caste: _____ Religion: _____
8. Details of passing the qualifying examination for admission to the present course:
 - a. Examination passed: _____ c. Year of passing: _____
 - b. Under _____ University d. Examination Roll No. _____
9. Date of examination to the 1st Semester Class of the above course: _____
10. Papers with title in which to be examined:
 - a. Paper _____ Title: _____
 - b. Paper _____ Title: _____
 - c. Paper _____ Title: _____
 - d. Paper _____ Title: _____
 - e. Paper _____ Title: _____
 - f. Paper _____ Title: _____
11. Details of the earlier Semester Examination passed, where necessary,
 - a. 1st Semester Examination held in _____ under Roll No _____
 - b. 2nd Semester Examination held in _____ under Roll No _____
 - c. 3rd Semester Examination held in _____ under Roll No _____
 - d. 4th Semester Examination held in _____ under Roll No _____
 - e. 5th Semester Examination held in _____ under Roll No _____
12. Fees paid: Rs. _____ (Rupees _____)

I hereby affirm that the particulars stated above are true to the best of my knowledge and belief. I have also gone through the Rules and Regulations governing this examination. Therefore, if at any stage, any of the statement made by me is found to be false or my appearing he above examination is found to be in contravention to rules, regulations, standing orders and circulars in force governing the above examination. I understand that my examination shall be liable to be cancelled by the University at any stage, even after admission to the examination has been granted and that the decision of the University in this regard shall be final and binding upon me.

Yours obediently

Signature of the Candidate

Name of the Candidate:

Date:

CERTIFICATE FROM THE HEAD OF THE DEPARTMENT

This is to certify that the candidate has prosecuted his/her studies as required by the concerned Regulation and that his/her conduct has been good and that I know nothing against his / her moral character. The details of his/her studies since admission to the _____ Semester Course are as below:

1. Date of admission to the Course: _____
2. Date of completion of the Course: _____
3. No of lectures delivered : _____
4. No of lectured attended : _____
5. Remarks: REGULAR / NON-COLLEGIATE: _____

Date: _____

Signature
Head of the Department
Seal: