

## APPLICATION FOR Re-REGISTRATION / EXAMINATION (new syllabus)

(Please tick your option	ons "\")						
COURSE: B.	Α	BBA		B. Com			
YEAR: Fi	rst Year	Second Year		Third Year			
CANDIDATURE:	Proper	Fresh		Repeat			
SEMESTER: Se	emester- I	Semester- II		Medium			
<b>BATCH:</b> (i.e. 2014/2015, 2015/2016, 2016/2017, 2020/2021, 2021/2022)							
01. Registration No	: SEU ES		NIC No.				
02. (i) Name with initials:							
(iii) Present Address:							
(iv) Contact No. :/(v) WhatsApp No:							
(vi) E-mail ID	:						
03. Subjects applied for Examination							
Subject Code		Subjec	t Title				
01							
02							
03							
04							
05							
06							

No of Subjects:	Amount :	Date of Payment:
Branch of Bank:		
	Exam Fee Affix the <b>PIV University</b>	<b>Copy</b> here
aware that my applications and if the examination entry fee prexamination hall unless	ation could be rejected for e application is rejected, paid by me. I am also awa	ulars relevant to the application. I amor the reasons given in the general the University will not refund the are that I will not be admitted to the dapproved by the University. I have of the prescribed fee.
Signature of Candidate		Date
For Office Use Only		
Entries Checked By:		Deputy Registrar/CEDPL
Registered / Not registe	ered for examination	
 Coordinator/Reg. & Ex	 amination	