GOVT COLLEGE OF ARTS AND SCINECE

TITTAGUDI – 606106

<u>UNIVERSITY EXAMINATIONS – Apr/May – Nov/Dec – 20</u>

Date: / /

Student Name: _____

Course Code & Name:_____University Reg. No. : _____

Theory Paper Details: (including Arrear)

Sl. No.	Semester	Subject Code	Subject Title
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Practical Paper Details: (including Arrear)

Sl. No.	Semester	Subject Code	Subject Title
1			
2			
3			

Total Papers: Theory:	Practical:	
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Total Fess Amount: Rs._____/- (In words ______

Signature

)

	Office Use	
Fee Paid Amount: Rs	/- Paid Date://	
Collected By:	Signature:	