



ALAGAPPA UNIVERSITY

(Reaccredited with 'A' Grade by NAAC)

KARAIKUDI - 630 003

Examination Section -Affiliated Colleges



EXAMINATION APPLICATION FORM FOR PRIVATE CANDIDATES

- Name of the Applicant (*In Capital*) :
- Father's Name :
- Name of the College through which enrolled :
- Course :
- Month & Year of Exam : Apr / Nov 20
- Register Number :
- Sex : Male / Female
- Semester for which you are appearing (*Arrears only*):

I	II	III	IV	V	VI
---	----	-----	----	---	----

- Subjects in which you are appearing :

SL. No	Subject Code	Sem. No	Title of the Paper
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

- Last Appearance : April / November / July 20



ALAGAPPA UNIVERSITY

(Reaccredited with 'A' Grade by NAAC)

KARAIKUDI - 630 003

Examination Section -Affiliated Colleges



HALL TICKET

(To be Filled in by the candidate)

- Name of the Applicant (*In Capital*) :
- Course :
- Register Number :
- Name of the College :
- Subject Appearing : SUBJECT CODE ONLY

Affix
Photograph
duly attested by
the College
Principal

Signature of the Candidate

CONTROLLER OF EXAMINATIONS