

Application for Semester I/II/III/IV/V/VI ATKT EXTERNAL EXAM

			Date	:/		
Name	Of the Candidate:					
Mobile	e No:	_ Email Id	:			
Course		_ Year : FY 🗌 SY 🗌 TY 🗌 DIV:				
RollNo:		_Last Appeared Exam Year /Month:				
Studer	nt Type: Regular: Dr	op Studer	nt: 🗌 Ex Stu	dent:		
<u>Details</u>	s for the Appearing Semest	er:				
Semes	ter:					
Sr No	•		Internal Marks	External Marks		
1						

Sr	Name of Subject	Internal	External
No		Marks	Marks
1			
2			
3			
4			
5			
6			
7			

Please note: 1. Attach photocopy of the recent Mark-sheet

2. Fill ATKT Exam forms Semester-wise

Signature of the Student