

GET & READ INSTRUCTIONS BEFORE FILLING THIS FORM

Form E-2

Roll No.
(To be assigned by the Office)

PANJAB UNIVERSITY CHANDIGARH

EXAMINATION FORM for **Private Candidates** for M.A. Part I & II Examinations April/September, 20 ____.
(To be used for Full Subjects/Re-appear/Improvement Examination)

IMPORTANT NOTE: THE CANDIDATE MUST FILL IN THE EXAMINATION FORM IN HIS/HER OWN HAND.

Tick Mark (✓) the applicable box and Cross(X) not applicable boxes.

M.A. Part-I : _____ M.A. Part-II : _____
[Name of the Subject] [Name of the Subject]

Year Month (i.e. APR/SEP or as applicable)

IMPORTANT NOTE

- i) If the qualifying examination passed from other University/ Council etc, attach the original Detailed Marks and Migration Certificates.
- ii) The candidates appearing in all the University examinations for purposes of improvement of previous performance or to clear re-appear/ compartment/ additional subject/ papers as permissible under the Rules Regulations of the University are required to appear therein according to the syllabi in force at the time of appearing in the examination.

A) CATEGORY (Tick Marks)

- 1. Fresh 3. Improvement
- 2. Fail 4. Reappear

B) SEX 1. Male 2. Female

C) CAPACITY (for appearing) :

- 1. Old Student 3. Woman
- 2. S.C./S.T. 4. Employed

Attach documentary proof for the above cases

D) STATE to which belongs to : _____

E) CENTRE OF EXAMINATION:

- 1 : _____
- 2 : _____

(Write in Capitals, the name of center preferred)

F) For Improvement of Performance indicate the Category.

- 1. Part-I Only in April/May _____.
- 2. Parts I & II Simultaneously (Submit separate examination form and full fee for each Part.)
- 3. **Both Parts separately** : -
 - a) Part-I this Year & Part-II next Year.
 - b) Part-II this Year and Part-I next Year.
 - c) Part-I this Year & Part-II last Year
 - d) Part-II this Year and Part-I last Year.

Personal Information

Regd. No.

Note: Please leave one blank space each between different parts of the name/father's/mother's name.

Name :

Father's Name :

Mother's Name :

Subjects Offered

(CODE WISE)

(NOTE : THE SUBJECT CODES SHOULD BE ENTERED AS PER CODING SCHEME GIVEN IN THE INSTRUCTION BOOKLET.)

For the students appearing in Examinations of M.A. Part-I

A. Qualifying Examination Passed	Subject Offered	Name of University/ Institution	Year	Session (April/Sept)	Roll No	Marks Obtained	Result Pass/Fail/Compartment
BA/BSc.(TDC) Part-III							
For Re-appear Candidates Only							
For Improvement of Performance Candidates Only							

For the students appearing in Examinations of M.A. Part-II

Examination Passed	Subject Offered	Name of University/ Institution	Year	Session (April/Sept)	Roll No	Marks Obtained	Result Pass/Fail/Compartment
MA Part-I							
For Re-appear Candidates Only							
For Improvement of Performance Candidates Only							

B. Have you applied for re-evaluation? Yes/No. (If yes, give the following particulars) :-

- i) Class _____ ii) Roll No _____ iii) Result after re-evaluation _____
 iv) Date of declaration of result _____

- C. (i)** Have you ever been disqualified by any University / Board/Council or if any enquiry is pending against you in a case of alleged serious misconduct and or use of unfair means during examinations. **Yes/No.**
 If yes, **Examination** _____ **Year/Session** _____ **Roll No.** _____ **University/Board/ Council** _____
 Disqualification awarded upto: **Session** _____ **Year** _____
- (ii)** Whether member of Scheduled Caste/ Tribe/ Backward Class (State Category) _____
- (iii)** Whether blind or Permanently disabled from writing or Crippled (State nature of disability) _____ } (Attach copy of the certificate in each case)
- (iv)** Whether you need a WRITER ? **Yes/No**
- (v) Specimen handwriting of the Candidate** _____

D. Solemn Declarations:

I have filled in the form in my own hand after careful study of the University syllabi, structural outlines of the Course, rules and regulations pertaining to the year and session of the examination, under reference. The statements made by me in the form are correct. I accept full liability for any action against me under the rules/regulations of the University for any mis-statement or concealment of facts made by me.

Date: _____
 Place: _____

_____ (Full Signature of the Candidate)

Address for Correspondence

Permanent Address

Pin Code _____ Phone No. _____

Pin Code _____ Phone No _____

CHECK LIST OF DOCUMENTS/INFORMATION TO BE SUPPLIED BY THE PRIVATE CANDIDATES ONLY

1. (a) Have you passed the qualifying exam from this University? (Yes/No)
 (b) If yes, there is no need to attach the original detailed Marks Card.
2. (a) Have you passed the qualifying examination from the Board/University/Council other than Panjab University? (Yes/No)
 (b) If yes, attach the original Detailed Marks and Migration Certificates from the Board/University/Council.
3. Have you got your examination form attested by a competent authority as prescribed by the Panjab University ? (Yes/No)
4. Have you filled in all the columns of the Exam. Form properly and that no column has been left blank ? (Yes/No)
5. Have you attached three copies of your latest passport size of your photograph from one and the same negative ? (Yes/No)
6. Have you attached the SC/ST/BC certificate issued by the competent authority (if applicable) (Yes/No)

Dated _____

_____ (Full Signature of the Candidate)

Certificate for Late College Students (Of Colleges/Deptt. of Correspondence/ Evening Studies)

I certify that the applicant: -

- (a) has previously appeared in the examination under Roll No _____ in Session _____ Year _____.
- (b) has completed the prescribed course of lecturers/ practicals etc. in the college or has been on the rolls of the Department of correspondence/ Evening Studies from July 20__ to April, 20__ in the subject/s offered by him/her and has **paid** continuation fee of **Rs. 40/-** vide Receipt _____ Dated _____.
- (c) bears a good moral character.
- (d) has signed the examination form in my presence and satisfied me by production of authentic documents, that the statements made by him/her are correct.

**Photograph
(For all candidates)**

**Duly attested by the
competent authority.**

**Full Signature of the Principal of the College /
Chairperson D.C.S./D.E.S. (Last Attended)**
(With Official Stamp)

Dated _____

Certificate for Private Candidates (other than late college students)

(Items not applicable may be struck off).

I certify that:

- (i) I know the applicant personally. He/she bears a good moral character. His/her attested photograph is affixed. He/she has signed this examination form in my presence and has satisfied me by production of authentic documents that the statements made by him/her in the form are correct.
- (ii) The applicant has been in continuous service since _____ and will continue to be as such till the commencement of the examination. He/she has completed at least 3 years service on 30th November preceding the year of examination.
(a) Name of Institution/Organisation/ Deptt. _____
(b) Date of Joining _____ (c) Rank/Designation _____
- (iii) He/she has not been a regular student of an affiliated college during the academic year preceding the examination.
- (iv) There is no Evening college/Evening Classes in any college at the place where the applicant is employed OR he was not granted departmental permission to join the Evening College/Evening Classes by the employer due to the nature of his duties (Attach certificate) OR that the applicant was not granted admission in the Evening College/Evening Classes by the Principal. In case there are more than one Evening college/Classes, this certificate may be obtained from all of them. (This certificate is not needed in case of a woman candidate).
- (v) **For Defence Personnel Only:** (a) he is a bonafide (permanent) resident of _____ District in the State of Punjab/ Haryana/ Himachal Pradesh / Chandigarh (U.T.) _____ (b) He has been working in the _____ State since (month) _____ (Year) _____ and will continue till the Commencement of examination.

Note: Teachers of Govt. Primary/Middle /High School should get their forms attested by the Distt. Education Officer./Circle Education Officer.

Name of the Attesting Authority (In CAPITALS)

Designation _____

Signature & Stamp of the Head of Institution/
Organisation /Deptt. where candidate is employed
or any other attesting authority
Dated _____

Details of Late/Extra/Special or Any Additional Fee remitted, if any.

To be filled by the Candidate

- i) Fee Remitted (Rs. _____/-) SBI Journal NO. _____, Dated _____, Drawn on (Name of Bank) _____

For Office use only.

- ii) Regd Letter No _____, Date _____, Date of Receipt _____, Amount Received (Rs. _____/-.)

Full Signature of the Receiving official: _____

(For Office Use only)

Eligible Subject
to _____.

Not eligible _____.
Reasons: - _____.

Dealing Official Assistant/ A.S.O. Supdt. Dealing Official Assistant/ A.S.O. Supdt. A.R.E.

PANJAB UNIVERSITY, CHANDIGARH

PROVISIONAL ROLL NO. CARD

(To be filled in by the Candidate)

(For candidate)

(This Roll no is issued Subject to Final Confirmation of your eligibility)

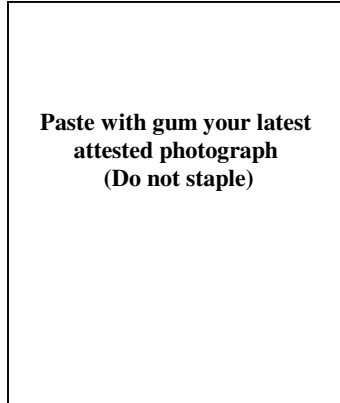
Name of Exam/Class _____.
 Session _____ Year 20__.
 Full Subject/Re-appear/Improvement Subject (Tick mark(✓) whichever applicable)
 Subject(s) offered. _____.

Roll No. _____.
 Regd No. _____.
 Name _____.
 Son/Daughter of Sh. _____.
 College/Deptt. _____.
 State _____.

Centre of Exam _____.
 Centre No _____.

 (Full Signatures of Candidate)

Controller of Examinations.



This card is required to be carried by the candidate and shown on demand in the Examination Centre for verification.

: At the end of the Examination, this Card must be preserved by the candidate till the receipt of Detailed Marks Card.

PANJAB UNIVERSITY, CHANDIGARH

PROVISIONAL ROLL NO. CARD

(To be filled in by the Candidate)

(For the Centre Supdt. of the Exams.)

(This Roll no is issued Subject to Final Confirmation of your eligibility)

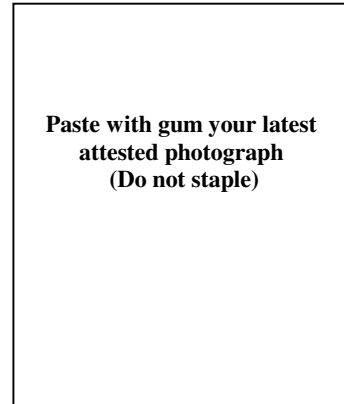
Name of Exam/Class _____.
 Session _____ Year 20__.
 Full Subject/Re-appear/Improvement Subject (Tick mark(✓) whichever applicable)
 Subject(s) offered. _____.

Roll No. _____.
 Regd No. _____.
 Name _____.
 Son/Daughter of Sh. _____.
 College/Deptt. _____.
 State _____.

Centre of Exam _____.
 Centre No _____.

 (Full Signatures of Candidate)

Controller of Examinations.



: At the end of the Examination, this Card must be returned to the University in a separate Packet.

PANJAB UNIVERSITY, CHANDIGARH

Examination Branch (Form Cell)

(To be filled in by the Candidate)

(Office copy)

Sr. No. of Examination Form _____

Dated _____

Collection Centre : Hoshiarpur / Ludhiana / Muktsar / Abohar / Ferozepur / Moga / Chandigarh.
(Acknowledgement Receipt)

Received Exam. Form of Mr. Ms. _____
son/daughter of Shri _____ alongwith SBI
Journal No. _____ Dated _____ for Rs. _____ (Rupees
_____) on account of Examination Form and Admission
Fee for _____ class/Examination, 20____.

.....
(Signature of the Candidate)

For Controller of Exams.

PANJAB UNIVERSIRY, CHANDIGARH

Examination Branch (Form Cell)

(To be filled in by the Candidate)

(Candidate's copy)

Sr. No. of Examination Form _____

Dated _____

Collection Centre : Hoshiarpur / Ludhiana / Muktsar / Abohar / Ferozepur / Moga / Chandigarh.
(Acknowledgement Receipt)

Received Exam. Form of Mr. Ms. _____
son/daughter of Shri _____ alongwith SBI
Journal No. _____ Dated _____ for Rs. _____ (Rupees
_____) on account of Examination Form and Admission
Fee for _____ class/Examination, 20____.

.....
(Signature of the Candidate)

For Controller of Exams.