



Checked by.....

University of Kalyani

DIRECTORATE OF OPEN & DISTANCE LEARNING

Kalyani, Nadia: 741235, W.B.

APPLICATION FORM OF RENEWAL FOR RE-EXAMINATION INTO M.A/M.Sc SECOND SEMESTER OF (2021-23 & 2022-24, Nov. 2022)

| Name of the Study Centre: | | | | | |
|---|-------------------|---------|--------------|-------------------|-----------------|
| Study Centre Code No.: | | | | | |
| M.A./M.Sc. 2nd Semester Renewal (Mention the | Name of t | the sub | ject): | | |
| Special Paper if any: | | | | | |
| 1. Mention Number of Paper for Re-Examination | (Please √): | : | | | |
| | Or | ne l | Two | All | 7 |
| | | | | papers | |
| 2. Mention the Paper Code for Re-Examination: | I) | | | | |
| II) | | | | | |
| III) | | | | | |
| IV) | | | | | |
| V) | | | | | |
| VI) | | | | | |
| 3. Name of the Applicant (in capital letters): | | | | | |
| 4. Son/Daughter/Wife of: | | | | | |
| 5. Enrolment No. : | | | | | |
| 6. Mobile No: | | | | | |
| 7. Payment Details: (Through SB Collect a) b) Amount (In Rs.).: | | | | | |
| b) Date of Payment | | | | | |
| c) SB Collect Ref. No | | | | | |
| I shall abide by the rules, regulations and direct | tives from | the off | ice of the D | ODL, failing whic | h the DODL may |
| forfeit my studentship. | | | | | |
| Date: | | | F | ull Signature of | f the Applicant |
| Note: | | | | | |
| After successful online payment of through SB C duly filled in " Application Form " along with c have to be sent to the official e-mail id of the DC | opy of Enr | rolmer | nt Certifica | te and Bank P | |
| FOR OFFICE USE | | | | | |

(Signature of the Head of the Study Centre / Head Quarter)