

## **ASSAM UNIVERSITY: SILCHAR**

## **NOTIFICATION**

Assam University, Silchar invites application from students for Special Chance Examination 2017 for PG/UG courses who have taken admission in the year 2010-11, 2011-12, 2012-13 and have exhausted all the chances to complete/clear the courses to complete the PG/UG courses within the stipulated time period for Odd & Even Semester papers/courses. Candidate(s) can seat for maximum 3(three) papers of all the semesters taken together.

Interested candidates should submit application in the prescribed format alongwith copies of all the marksheets by 10-03-2017 positively to the Controller of Examinations office through Head of the Departments of the concerned department.

The eligible candidates will have to pay the following fees.

- i) Rs. 300/- per paper subject to minimum of Rs. 500/-.
- ii) Rs. 300/- Centre fee.
- iii) Marksheet fee Rs. 50/- per marksheet.

Date of Examination will be notified on a later date considering eligible candidates.

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(Dr. Suprabir Dutta Roy) Controller of Examinations

No.: AUE/PG/Odd-Even/103/2017

Date : 10-02-2017

Copy to :

- 1. The HODs of all the department for information & necessary action for wide circulation to students of the concerned department.
- 2. The Deans of the Schools.
- 3. Prof.-in-charge, Diphu Campus.
- 4. PS to VC for kind information of Vice-Chancellor.
- 5. Registrar.
- 6. Asstt. Registrar, Estate Section.
- 7. Director, Computer Centre for uploading the same in the University website.
- 8. Office file.

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Controller of Examinations

## FORMAT FOR APPLICATION FOR SPECIAL CHANCE EXAMINATIONS, 2017

1.	Name of the candidate	
2.	Father's Name	
3.	Mother's Name	
4.	Address	
5.	Mobile No.	
6.	e-mail	
7.	Department	
8.	Roll No.	
9.	Registration No. & Year	
10.	Date of Admission	

11. Courses yet to clear

Semester	Arrear Paper

(candidate having three or less arrear papers in all semesters will be eligible for apply)

Enclosed : Copies of marksheets of all the Exam(s) of the course.

Date :

Signature of the Candidate

Recommendation of HoD Forwarding No. \_\_\_\_\_ Date \_\_\_\_\_ (Duplicate copy of the format should be submitted to the dept. by the student for record)