



ASSAM UNIVERSITY : SILCHAR, ASSAM (INDIA) <u>DESPATCH FORM</u>

In charge o	of TDC / PG / UG	/ B.Ed / LL.B / M.B.B.S. I	Examination	(year)
	[Put tick (√)mark	k in applicable box]		
at the				Centre
No				Dated
	troller of Examina Iniversity, Silchar	ations		
Reports despa	atch, by Railway / P	ost Parcel / Messenger / vid	e no. /through (Name)	
dt	. of	Boxes / Packets contain	ning Answer Scripts as	per details given below.
Subjects	Paper	Date of Examination	No. of Scripts	No. of inner packets in an outer packets of the paper
Total No. of P	ackets			
Signature of	Messenger		Full Signature of	f the Officer-in-Charge
Post Percel No. :			Ph. NoOffice Seal	

Note: 1. Whether subject/paper compulsory or optional should be indicated clearly.

2. Inner packet of a paper should not contain more than 100 scripts.