Allotment of fund for Conducting CU Practical Examination

Name of the Examination (with year):

Name of the Department:

Semester: I ☐ II ☐ III ☐ IV ☐ V ☐ VI ☐

Stream: HONS ☐ Gen ☐

Paper												
No. of Students												

Name of the HOD:

Name of the Internal Examiners:

Chq. To be drawn in favour of:

Please allot fund for contingency purpose for conducting CU Practical Examination.

Signature of HOD

Signature of Internal Examiner

(For Office Use Only)

Entry ID:

Allotment Amount: `_____

Please submit this form at least 7 days prior to the date of examination.

VIVEKANANDA COLLEGE