

Register No. **TFATSCH009**

UNIVERSITY OF CALICUT
EXAMINATION REGISTRATION



Name of the Candidate	ABHIRAMI M S		
Date of Birth	07.04.2001	Gender	Female

I Semester (CBCSS - UG) Supplementary / Improvement Examination November 2022 (2019 to 2021 Admissions)

Center	FATHIMA ARTS AND SCIENCE COLLEGE MOOTHEDAM, NILAMBUR		
Communication Address	MADHUCHIRAYIL, PATHAR P O, MALAPPURAM-679334		
Mobile Number	9497871009	e-mail	abhiramims82@gmail.com

Registration Details

Chalan No.	Date of Remittance	Name of Treasury	Amount
231317800	01.03.2023	SBI Payment Gateway	175

#	Paper Code	Paper Name	Exam Type
1	MTS1C01	MATHEMATICS - I	Supplementary

I hereby certify that the above details are correct to the best of my knowledge

Place:

Signature of Candidate