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| **EDGE exam Informatin** | | | | | | | |
| **Name:** | ……………………………………….. | | | Fathers Name: | | …………………………………………………………. | |
| **Batch No:** | ………………………………………….. | | | Mothers Name | | …………………………………………………………. | |
| **Semester:** | Year | | | Department Name: | |  | |
|  | | | | | | | |
| Edge Class: | |  | | Marks | |  | |
|  | | | | | | | |
| Time | | |  | |  | Day: |  |
| Course  Name: | | | ……………………………………………………. | |  | No of class: | ………………………….. |