



Register No. AIAUBCA049

UNIVERSITY OF CALICUT
EXAMINATION REGISTRATION



Name of the Candidate	MUHAMMED AFSAL T A		
Date of Birth	09.07.2001	Gender	Male

Identifying Officer's

Name, Designation and Address

Signature of Identifying Officer with Seal
(To be signed on the Photograph)

Signature of the Candidate

(To be signed in the Presence of Identifying Officer) -----

Second Semester (CBCSS - UG) Supplementary / Improvement Examination April 2022 (2019 Admission onwards)

Center	M.E.S. ASMABI COLLEGE , VEMBALLUR P.O ,KODUNGALLUR		
Communication Address	THANIPEEDIKAYIL HOUSE		
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Registration Details

Chalan No.	Date of Remittance	Name of Treasury	Amount
222631013	24.10.2022	SBI Payment Gateway	230

#	Paper Code	Paper Name	Exam Type
1	BCA2B02	PROBLEM SOLVING USING C	Supplementary

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

Place:

Signature of Candidate