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To, The Controller of Examinations (Heritage Institute of Technology)

Programme : Post Graduate

Semester : 6th

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Sl.	General Informations	
1.	NAME (IN BLOCK LETTERS)	SAYAN SINHA
2.	Name of the Examination	MCA
3.	Stream	Master of Computer Application
4.	Roll Number	30317010046
5.	Registration Number	173030510046
6.	Mobile Number	8617497474



### PAPER DETAILS

Compulsory Papers	Elective Papers
MCAP 3221      Comprehensive Viva MCAP 3295      Major Project and Seminar	
This is system generated Semester Form. The hard copy of the form is not required to be submitted.	
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