



LEADING UNIVERSITY

Office of the Controller of Examinations Application for Makeup Examinations

Student ID:		Student Name:	
Semester Year:	Spring/Summar/Fall/20	Department:	BuA/CSE/English/Law/EEE/L.Studies/Architecture/Civil/p.Health/THM
Course Code:		Course Title:	
Date of Examination Scheduled:		Course Teacher:	
Contact No. of Student:		Examination:	<input type="checkbox"/> Midterm <input type="checkbox"/> Semester Final

Signature Of The Student With Date

3.Clearence Of Office Of The Controller
Of Exams Signature With Date:

Signature Of The Student With Date

Date And Time Of Make-Up Examination
(Course Teacher Will Fill This)

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Signature Of Head Of Department
Date:

3.Clearence Of Finance And Accounts
Date:

Fees Of Make-Up Examination:

i)Mid-term Exam:2000TK.ii)Final Exam:3000TK.

N.B:Student Will Not Allowed To Sit For Mid Term And Semester Final
Make-up examination for the same Course.



LEADING UNIVERSITY

Admit Card for Makeup Examinations

Student ID:		Date and Time of Exam:	
Student Name:		Course Teacher:	
Course Code:		Course Title:	
Semester-Year:	Spring/Summar/Fall/20	Examination:	<input type="checkbox"/> Midterm <input type="checkbox"/> Semester Final

Signature Of Controller Of Examinations