



KANNUR UNIVERSITY

APPLICATION FORM

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attested

Fifth Semester (Regular) UG Programmes(CBCSS OBE) Examination November 2024

REGISTER NUMBER :	CW22BCAR22	
NAME OF THE CANDIDATE :	DITZA S RAJ	
PROGRAMME :	Computer Application	
CENTER OF EXAMINATION :	Chinmaya Arts and Science College for Women, Chala	
ADDRESS :	CHERUVIL HOUSE,KIZHAKKUV AYAL,CHENDAYAD,CHENDAYAD , Kannur - 670692	
DATE OF BIRTH :	04-11-2004	
CHALAN NUMBER & AMOUNT	CHALAN DATE	NAME OF TREASURY
KN17258-99187-76118-34237 (915.00)	2024-09-09T21:56:13	SBI

Course details for which the student registered for examination

Sl. No.	Course Name
1	5B12BCA Operating System
2	5B13BCA Enterprise Java Programming
3	5B14BCA Python Programming
4	5B15BCA Web Technology
5	5B16BCA-E01 Information Security
6	5D01(1)ENG English for Competitive Examinations

I hereby declare that all relevant columns have been filled in and that the entries made above are correct.

Place: _____ Signature of the candidate

CERTIFICATE

I hereby certify that the entries made above have been verified by me, and that I have found them to agree with those in the records of this college and courses selected by the student as per syllabus concerned.

AFFIDAVIT

(for candidates availing fee concession who receive the grant through institution's bank account and has not remitted examination fee during registration - Strike off, if not applicable.)

This is to certify that Sri/ Smt. **DITZA S RAJ** appearing for the examination in the First/ Second consecutive chance has applied for eligible fee concession in time. His/ her Examinations fee of **₹915.00** will be claimed by me from the Government Department concerned and will be remitted to the University. Details of such remittance will be informed to the Controller of Examinations.

Date : _____ Office Seal: _____ Signature of the Principal

Note: The principal should obtain an affidavit in the format provided in the registration page, from all SC/ST candidates who are eligible for direct beneficiary transfer as per the order.