

Form No. D

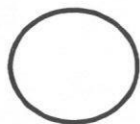
Details of Additional Seat Numbers

Name of the Examination					Date:			
Name of the Centre								
Centre Code					Department /College Code :-			
Sr. No.	Name of the Student (As per the previous Marksheet)	PRN Number allotted by the E-suvidha	Semester/ Pattern	Medium	Additional Seat Number Allotted by the Department / College	Subject Code	Internal Marks Obtained By the Student	Remarks
						1		
						2		
						3		
						4		
						5		
						6		
						1		
						2		
						3		
						4		
						5		
						6		

Date:

Signature: _____

Department /College Seal:



Name: _____

Head of the Department / Principal

Place:

Note: To be submitted in Excel Soft and Hard Copy.

To be submitted alongwith the last paper / last day of the examination.