



Directorate of Distance Education

INTEGRAL UNIVERSITY

Set up Under UP state ACT NO. 9 of 2004, Recognised by (UGC, AICTE, NCTE, PCI, AIU, MCI, UGC, -DEB)

REAPPEAR – APPLICATION FORM

(For Term End Examination –July -2014)

1. ENROLMENT No _____ 2. COURSE: _____ YEAR/SEMESTER _____

3. NAME OF THE CANDIDATE (IN BLOCK LETTERS) _____

4. FATHER'S NAME (IN BLOCK LETTERS) _____

5. Name of the Subjects/ Papers in which now appearing:-

(I) Subject Name & Code: _____

(II) Subject Name & Code: _____

(III) Subject Name & Code: _____

(IV) Subject Name & Code: _____

(V) Subject Name & Code: _____

(VI) Subject Name & Code: _____

6. Reappear Fee Deposit Details:-

DD No.: _____ Amount.: _____ Dated: _____ Bank Name & branch : _____

(Note: Reappear fee Rs 250 /- Per Subject and maximum 800/- per semester. Candidate must fill separate reappear forms and attach separate Demand Drafts for different semesters)

Signature of the Candidate

Date:

Coordinator Signature
(With Seal and Date)

------(FOR OFFICE USE/)-----

ELIGIBLE / NOT ELIGIBLE (WITH REASON) _____

Controller
Examination Control Office(ECO)-DDE