

Application No.: _____



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Office of the Controller of Examinations

Application Form for Paper Seeing – December/January/May/June. 20...

Registration No.				
Name of the Candidate (in CAPITAL LETTERS)				
Program and Branch				
Mobile No.		Email ID		
Sem	Course Code	Course Title	Name of the Faculty	Slot

Rs. 100/- Per Paper/course for both UG and PG courses to be paid in **Finance Section, VIT Bhopal University** and Original Receipt should be enclosed & submitted with this form to O/o of Controller of Examination.

Payment Details:	Receipt No.:	Date	Amount

Signature of the Student with Date

For Office Use only