



# GITAM UNIVERSITY

(Declared as deemed-to-be-University u/s 3 of the UGC Act, 1956)

VISAKHAPATNAM-530 045, (A.P)

## DIRECTORATE OF EVALUATION

### EXAMINATION APPLICATION FORM

Supplementary   
(For Candidates with Backlogs)

Repeat Continuous Evaluation

Betterment Exam

Special Exam  Special Drive Exam

1. Name of the Candidate :  
(as in SSC, in capital letters)

2. Registered No. :

3. Examination Appearing for : i) Month: .....Year: .....  
ii) Program:..... iii) Branch:..... iv) Semester/Trimester.....

4. Courses applying for :

S.No.	Course Code	Title of the course
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

5. Campus : Visakhapatnam  Hyderabad  Bengaluru

6. Contact No: Mobile \_\_\_\_\_ Landline with STD \_\_\_\_\_  
email Id :

7. Fee particulars: Enclose Original Challan/DD to the application.  
In case of DD, write your name & Regd. No. on the reverse.

Amount paid: Rs.                      Challan/D.D No:                      Date of Payment:

Name of the Bank:                      Branch:

Place:

Date :

Signature of the Candidate

(For Office Use only)

Recommended

Not recommended

Signature of  
Head of the Department

Signature of  
Principal/Director