



MID TERM EXAMINATION FORM
Academic Year 2017-2018

COURSE TITLE:..... **SEMESTER:-**.....

LAST DATE FOR SUBMISSION OF FORM: - 18TH AUGUST 2017

1. NAME OF CANDIDATE: _____
2. NCHM ROLL NO.: _____
3. FATHER'S NAME: _____
4. PERMANENT RESIDENTIAL ADDRESS FOR CORRESPONDENCE

Paste Passport
Size Photograph.

(Do not staple)

_____ PIN: _____ MOBILE NO. _____

5. DATE OF BIRTH _____ SEX: MALE/FEMALE

6. Give details of subject(s) reappearing for:-

| S.No. | Subject Code | Subject | Remarks |
|-------|--------------|---------|---------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |

MID TERM EXAMINATION FEE @ 200/- PER SUBJECT

7. Give details of examination and related fees paid: **Total Examination Fee**
8.
 - a) Certified that the name as written above by me is correct.
 - b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
 - c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)