

VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY, ODISHA, BURLA

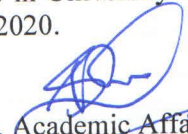
NOTICE

No.VSSUT/ACD/MID/ 205

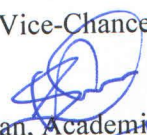
Dated: 20-02-2020

The eligible students of Even Semester U.G./P.G./ Ph.D. -2020 those who want to appear repeat Mid-Semester examination as per Academic Regulations are required to apply in prescribed format attached with this notice. The prescribed application form for this purpose is available in University Web site. All recommended cases should reach the office of undersigned on or before 07.03.2020.

(35)  
Memo No.VSSUT/ACD/MID/ 206  
Copy to:

  
Dean, Academic Affairs  
Dated: 20-02-2020

1. University Notice Board
2. All Halls of Residence for information.
3. All HODs for information & necessary action.
4. COE/ Professor, Training & Placement for information.
5. Dean, Faculty and Planning with a request to instruct the Manager, University Website to display the notice in VSSUT Website.
6. PA to Vice-Chancellor for kind information of Hon'ble Vice-Chancellor.

  
Dean, Academic Affairs  
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Soul  
19/2/2020  
20/2/2020  
DUC  
19/2/2020

**VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY, BURLA**  
(APPLICATION FORM FOR REPEAT MID-SEMESTER EXAMINATION)

1. Name of the Applicant:
2. (a) Registration No: (b) Semester:  
(c) Programme (B.Tech/B.Arch/5yrs-Int. M.Tech/5yrs-Int. M.Sc./M.Sc./M.Phil./Ph.D):
3. (a) Branch/Department: (b) Section (if any):  
(c) Contact Tel.No. of the applicant: (d) E-Mail ID:  
(d) Contact Tel. No. of Parents:
4. (a) Boarder/Day Scholar:  
(b) Name of the Hall of Residence (if Boarder):
5.  Mark against the clause of Academic Regulation for not appearing Mid-Semester Examination (supporting documents are to be attached)
  - (a) Death in a family:
  - (b) Illness leading to hospitalization:  
(to be supported by the discharge certificate from the hospital)
  - (c) Participation in Cultural/Sports/other official/Academic assignment in the interest of university

6. Name and Code of the subject  
(in which the applicant want to appear Repeat Mid-Semester Examination)

| Sl.No. | Subject Code | Name of the Subject | Date of Mid-Semester Examination notified for the subject |
|--------|--------------|---------------------|---|
| 1      |              |                     |   |
| 2      |              |                     |   |
| 3      |              |                     |   |
| 4      |              |                     |   |
| 5      |              |                     |   |

7. List of documents enclosed to substantiate the clause for Repeat Mid-Semester Examination.
- (i)
  - (ii)
  - (iii)
  - (iv)

(Full Signature of the Student)

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(All recommended cases should reach the office of Dean, Academic Affairs on or before last day of Mid-Semester Examination)

Letter No.

Dated:

Forwarded & Recommended

Signature of concerned official with official stamp  
(Warden of Hall of Residence/Dean Students' Welfare)