VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY, BURLA

NOTICE

No.VSSUT/ACD/MID/ 956

Dated: 10.11. 201

The eligible students of Odd Semester U.G./P.G./ Ph.D. November-2021 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 22.11.2021.

Memo No.VSSUT/ACD/MID/ 957 Copy to:

Dean, Academic Affairs | Dated: | 0 - 11 201

1. University Notice Board

2. All Wardens Halls of Residence for information.

3. All HODs for information & necessary action.

4. Controller of Examination/ Professor, Training & Placement for information & necessary action..

5. Dean, Student's Welfare for information & necessary action.

6. Dean, Faculty and Planning with a request to instruct the Manager, University Website to display the notice in VSSUT Website.

7. PA to Vice-Chancellor for kind information of Hon'ble Vice-Chancellor.

Dean, Academic Affairs

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

1. Name of the Applicant:

(a) Regist (c) Progra	tration No: amme (B.Tecl	n/B.Arch/5yrs	Int. M.Tech/5	(b) Semester: yrs-Int. M.Sc./M.Sc./M.Phil./Ph.D):	
(a) Branch/Department:(c) Contact Tel.No. of the applicant:(d) Contact Tel. No. of Parents:				(b) Section (if any):(d) E-Mail ID:	
(a) Board (b) Name	der/Day Schol e of the Hall o	ar: f Residence (i	f Boarder):		
√ Mark a Examina	against the cla tion (supporti	use of Acaden	nic Regulation are to be attach	for not appearing Mid-Semester hed)	
(b) Illne (to b (c) Parti univ	ess leading to lose supported be icipation in Curersity	y the discharg ultural/Sports/	o certificate fro	om the hospital) academic assignment in the interest of	
(in whice	h the applican	t want to appe	ar Repeat Mid	-Semester Examination)	
Sl.No.	Subject	Name of t	he Subject	Date of Mid-Semester Examination notified for the subject	1
11					_
2					_
3					_
4					-
5					
(i) (ii) (iii) (iv)				(Full Signature of the Student))
(All red day of	commended ca Mid-Semester	nses should rea Examination)	ach the office of	f Dean, Academic Affairs on or before las	51
Leftter	No.			Dated:	
Dettier					
	(c) Programatical (d) Contact (d) Contact (d) Contact (d) Contact (d) Contact (d) Ramatical (d) Name at (a) Deat (b) Illne (to b) (c) Particular (in which is shown in the contact (in the co	(a) Branch/Department (c) Contact Tel.No. of (d) Contact Tel. No. of (a) Boarder/Day Schol (b) Name of the Hall o √ Mark against the clar Examination (supporti (a) Death in a family: (b) Illness leading to h (to be supported b) (c) Participation in Ch university Name and Code of the (in which the applicant Sl.No. Subject Code 1 2 3 4 5 List of documents end (i) (ii) (iii) (iii) (iv)	(c) Programme (B.Tech/B.Arch/5yrs- (a) Branch/Department: (c) Contact Tel.No. of the applicant: (d) Contact Tel. No. of Parents: (a) Boarder/Day Scholar: (b) Name of the Hall of Residence (ivulate of Academ Examination (supporting documents) (a) Death in a family: (b) Illness leading to hospitalization (to be supported by the discharg) (c) Participation in Cultural/Sports/duniversity Name and Code of the subject (in which the applicant want to appendict the applicant want to appendict to the subject (in which the applicant want to appendict to the subject (in which the applicant want to appendict to the subject (in which the applicant want to appendict to substant (i) (ii) (iii) (iiii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (ii	(c) Programme (B.Tech/B.Arch/5yrs-Int. M. Tech/5yrs-Int. M. Tech/	(a) Registration to (c) Programme (B.Tech/B.Arch/5yrs-Int. M.Tech/5yrs-Int. M.Sc./M.Phil./Ph.D): (a) Branch/Department: (b) Section (if any): (c) Contact Tel.No. of the applicant: (d) Contact Tel. No. of Parents: (a) Boarder/Day Scholar: (b) Name of the Hall of Residence (if Boarder): √ 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 Name and Code of the subject (in which the applicant want to appear Repeat Mid-Semester Examination) SI.No. Subject Name of the Subject Date of Mid-Semester Examination (i) Code 1 2 3 4 5 List of documents enclosed to substantiate the clause for Repeat Mid-Semester Examination (ii) (iii) (iii) (iii) (iv) (Full Signature of the Student) Academic Affairs on or before last day of Mid-Semester Examination)