



THE UNIVERSITY OF BURDWAN

RAJBATI, BURDWAN

Department of the Controller of Examinations

DECLARATION FORM

FOR CANCELLATION OF SEMESTER-END EXAMINATION ON PRAYER

[This form must be submitted to the Result Section of the Department of Controller of Examinations, B.U. within 15 days from completion of the theoretical courses following the existing UG Regulation U.Reg.(CBCS)15]

To
The Controller of Examinations,
The University of Burdwan

(Through : The Principal of the College concerned)

Sir,

I do hereby declare that I want to cancel my Core Courses (including Practical portion, if any) /Other than Core Courses (including Practical portion, if any)/Entire Semester-end Examination of B.A./B.Sc./B.Com. Semester _____ Examination, 20____ under Choice Based Credit System as per U.Reg (CBCS) 15 of the relevant University Regulations approved by the appropriate authority of the University. My particulars are given below:

1. Name (in Block Letter) :

2. Roll No. :

3. Registration No. with Session :

4. Name of the Examination :

5. Nature of Cancellation :

Core Course	Other than Core Course	Entire Semester-end Examination

(Please put ✓ tick in the appropriate box)

6. Reason for Cancellation :

Thanking You,

Yours faithfully,

(Full Signature of the Candidate)

The above statements made by the candidate have been verified and his/her declaration is forwarded to the Controller of Examinations for taking necessary action.

Dated:

Signature of the Principal/TIC with Seal