

**UNIVERSITY OF MUMBAI'S
GARWARE INSTITUTE OF CAREER EDUCATION & DEVELOPMENT**

APPLICATION FOR SUPPLEMENTARY EXAMINATION

Student's Name (IN CAPITAL LETTERS ONLY):

(SURNAME) (NAME) (FATHER'S/HUSBAND'S NAME)

Course Name: _____

Semester: _____

Seat No.: _____

Mobile No: _____

Email Id: _____

I seek your permission to appear for SUPPLEMENTARY examination to be held in _____ (month, year).

I wish to appear for the above mentioned examination in the following subjects. (Put ✓ in appropriate column of Internal/ External Exam)

PAPER NO.	PAPER NAME	INTERNAL EXAM	EXTERNAL EXAM

NOTE:

- 1) Examination fee for Supplementary Exams
 - For UG/Bachelor Students: Per Paper Rs.200/- (For less than three papers) & Rs.600/- to reappear for more than three or all the papers.
 - For PG/Master Students: Per Paper Rs.200/- (For less than three papers) & Rs.800/- to reappear for more than three or all the papers.
- 2) Students are required to attach photocopy of the mark sheet in which they have ATKT along with this form.