



# G. VENKATASWAMY NAIDU COLLEGE (AUTONOMOUS),

Re-Accredited with 'A' Grade by NAAC  
(Affiliated to Manonmaniam Sundaranar University, Tirunelveli)  
Kovilpatti - 628 502.

## APPLICATION FORM FOR SPECIAL SUPPLEMENTARY EXAMINATIONS, JUNE 20\_\_\_\_\_

(Applicable only for a maximum of one Subject)

1. Name : .....

2. Programme & Branch :.....

3. Register No: 

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4. Address: .....

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Mobile No. : 

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5. Month and Year of the Examination: \_\_\_\_\_

6. Course, in which Supplementary Examination is sought

S.No	Semester	Course Code	Course Title
1.			

7. Fee detail:-

Special Supplementary Examinations - Rs. 1200/- per course (UG)  
Rs. 1400/- per course (PG)

Details of fee paid:

8. Amount Rs. \_\_\_\_\_

9. Date of Payment: \_\_\_\_\_

### DECLARATION

I declare that the particulars furnished above are true to the best of my knowledge and belief. I do hereby further agree that any dispute arising between the Office of Controller of Examinations and myself relating to the Examination to be held, shall be resolved/ decided by the Examination Committee of our College.

**Station:**

**Date:**

**SIGNATURE OF THE CANDIDATE**

**HEAD OF THE DEPARTMENT**

**PRINCIPAL**