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| (SEMESTER) SEMESTER (YEAR) ADMN |
| UG REGULAR (CBCSS-UG) EXAMINATION |
| EXAM PAPER VERIFICATION *(include only name of exam papers)* SUBMIT ON OR BEFORE (DATE) |
| PROGRAMME: |
| **SL** | **SUBJECT CODE****(IN ORDER)** | **NAME OF THE SUBJECT** | **CORE** | **ELEC** | **COMM** | **COMP** | **OPEN** | **PRAC** | **VIVA** | **AUDIT** | **NAME OF FACULTY** | **SIGN** |
| 1 |  | CORE/COMM/OPEN/ELECTIVE/PRACTICAL/AUDIT/VIVA |  |  |  |  |  |  |  |  |  |  |
| 2 |  | CORE/COMM/OPEN/ELECTIVE/PRACTICAL/AUDIT/VIVA |  |  |  |  |  |  |  |  |  |  |
| 3 |  | CORE/COMM/OPEN/ELECTIVE/PRACTICAL/AUDIT/VIVA |  |  |  |  |  |  |  |  |  |  |
| 4 |  | CORE/COMM/OPEN/ELECTIVE/PRACTICAL/AUDIT/VIVA |  |  |  |  |  |  |  |  |  |  |
| 5 |  | CORE/COMM/OPEN/ELECTIVE/PRACTICAL/AUDIT/VIVA |  |  |  |  |  |  |  |  |  |  |
| 6 |  | CORE/COMM/OPEN/ELECTIVE/PRACTICAL/AUDIT/VIVA |  |  |  |  |  |  |  |  |  |  |
| 7 |  | COMPLEMENTARYONE |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  | COMPLEMENTARYTWO |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  | FRENCH |  |  |  |  |  |  |  |  |  |  |  |
|  | GERMAN |  |  |  |  |  |  |  |  |  |  |  |
|  | HINDI |  |  |  |  |  |  |  |  |  |  |  |
|  | MAL |  |  |  |  |  |  |  |  |  |  |  |

* Use required rows only

NAME OF HOD & SIGN

* No overwriting

NAME OF CLASS ANIMATOR & SIGN