## VEER SURENDRA SAI UNIVERSITY OF TECHNOLOGY, ODISHA, BURLA N O T I C E

No.VSSUT/ACD/MID/599

The eligible students of Odd semester B.Tech./ B.Arch./M.Tech./MCA/M.Sc./ Int.M.Sc. & Ph.D-2018 those who want to appear repeat Mid-Semester examination as per Academic Regulations are required to apply in prescribed format as attached with this notice. The prescribed application form for this purpose is also available in University Web site. All recommended cases should reach the office of undersigned on or before last day of Mid-Semester Examination.

Sd/-

Dean, Academic Affairs Dated: 05.10.2018

Dated: 05.10.2018

Memo No.VSSUT/ACD/MID/600<sup>(30)</sup> Copy to:

- 1. Univerity Notice Board
- 2. All Halls of Residence for information.
- 3. All HODs for information & necessary action.
- 4. COE/ Professor, Training & Placement for information.
- 5. Dean, Faculty and planning with a request to instruct the manager, university website to display the notice.
- 6. PA to Vice-Chancellor for kind information to Hon'ble Vice-Chancellor.

Sd/-Dean, Academic Affairs

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

*1*. Name of the Applicant:

2.	(a) Registration No: (b) Semester: (c) Programme (B.Tech/B.Arch/5yrs-Int. M.Tech/5yrs-Int. M.Sc./M.Sc./M.Phil./Ph.D):							
3.	<ul><li>(a) Branch/Department:</li><li>(c) Contact Tel.No. of the applicant:</li><li>(d) Contact Tel. No. of Parents:</li></ul>			<ul><li>(b) Section (if any):</li><li>(d) E-Mail ID:</li></ul>				
4.	<ul><li>(a) Boarder/Day Scholar:</li><li>(b) Name of the Hall of Residence (if Boarder):</li></ul>							
5.	$\sqrt{\text{Mark}}$ against the clause of Academic Regulation for not appearing Mid-Semester Examination (supporting documents are to be attached)							
	<ul> <li>(a) Death in a family:</li> <li>(b) Illness leading to hospitalization:     (to be supported by the discharge certificate from the hospital)</li> <li>(c) Participation in Cultural/Sports/other official/Academic assignment in the interest of university</li> </ul>							
<i>6</i> .	Name and Code of the subject							
	(in which the applicant want to appear Repeat Mid-Semester							
	Sl.No.	nation)	Name of the Cubic	ct Date of Mid-Semester Examination				
	S1.1NO.	Subject Code	Name of the Subje	notified for the subject				
	1							
	2							
	3 4							
	5							
7.	List of documents enclosed to substantiate the clause for Repeat Mid-Semester Examination.  (i)  (ii)  (iii)  (iii)  (iv)							
	(Full Signature of the Student)							
	(All recommended cases should reach the office of Dean, Academic Affairs on or before last day of Mid-Semester Examination)							
	Lettter No.			Dated:				
	Forwarded & Recommended			Signature of concerned official with official stamp (Warden of Hall of Residence for Boarder / Dean Students' Welfare for Day Scholar)				