

APPLICATION FOR **MISSED MIDTERM**
 Semester _____ Year _____

Name of the Student: _____ Register No.: _____
 Branch: _____ Section: _____
 Mobile No: _____

Missed midterm applied for

S. No	Course Code	Course Title	Faculty Handling	
			Signature with Date	Name

Date: _____ Signature of the Student _____

❖ Reason for Absence(attach the medical certificate)

Remarks:

- ❖ Students who have missed their mid-term exam due to valid medical reasons alone will be permitted to appear for the missed midterm exam.(applications with valid medical proof)
- ❖ To be submitted to respective departments after the approval from the course handling faculty with in 5 working days immediately from the last date of midterm examination.

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