



ALAGAPPA UNIVERSITY

(Reaccredited with 'A' Grade by NAAC)

KARAIKUDI - 630 003

Examination Section -Affiliated Colleges



APPLICATION FOR SPECIAL SUPPLEMENTARY EXAMINATION(SSE)

Read Instructions Carefully - (To be Filled by the candidate)

1. Name of the Applicant(*In Capital*) :

2. Register Number :

--	--	--	--	--	--	--	--	--	--

3. Address for Communication & Pin code with Mobile Number :

4. Examination last attended :

Degree	Semester	Month & Year

5. The code and title of the paper in which the candidate has failed and is willing to take up SSE :

Code	Subject

6. Bank Details :(*Choose any one of the following*)

D. D Number	Bank Account No	Date	Issuing Banks particulars	Amount ₹.
	-----			1000
*-----	530796392		Indian Bank, AC Campus, Karaikudi	1000
*-----	0903101020752		Canara Bank, Karaikudi	1000

* Original Challan should be attached with this application

Note: Enclose Photo Copies of Mark Statements of Previous Semesters.

Date :

Signature of the Candidate

Recommendation of the Principal

Certified that _____ Reg. No. _____ Course _____ failed in **only one** subject _____ (Code) and eligible to write the Special Supplementary Examination in **April 20** .

Signature of the Principal

For Office Use Only

Verified By : EXAMINATION SECTION CONTROLLER OF EXAMINATION



ALAGAPPA UNIVERSITY

(Reaccredited with 'A' Grade by NAAC)

KARAIKUDI - 630 003

Examination Section -Affiliated Colleges



Vallal Dr. RM. Alagappa Chettiar

HALL TICKET - SSE

(To be Filled in by the candidate)

1. Name of the Applicant (*In Capital*) :
2. Course :
3. Register Number :
4. Name of the College :
5. Subject Appearing :

*Affix
Photograph
duly attested by
the College
Principal*

Code :	
Title :	

Signature of the Candidate

CONTROLLER OF EXAMINATIONS

INSTRUCTION

1. The Photograph should be duly attested by the Principal of the concerned college.
2. The Candidates should clearly fill in the application form.
3. The fee for applying for SSE is ₹. 1,000/- for all courses. The fee should be paid by Demand Draft / Bank Challan favouring **THE REGISTRAR, ALAGAPPA UNIVERSITY, KARAIKUDI** and payable at Karaikudi. (Money Orders , Cheques & Postal Orders will not be accepted)
4. The Original Bank Challan should be enclosed with this application. Photo copy of Bank Challan will not be accepted.
5. Application for SSE should be sent through the Principal of the college, addressed to **The Controller of Examination, Alagappa University, Karaikudi - 630 003.**
6. Original Statement of Marks **Should not** be enclosed along with the application. Only photo copy of the mark statement should be enclosed.