

UNIVERSITY OF CALICUT

(Pareeksha Bhavan)

No.65978/EG-I-ASST-2/2016/PB

Date : 23.07.2024

REVISED NOTIFICATION

Ref: 1.U.O No:1308/2024/PB dt:24.05.2024

2.Notification of even number dt:05.07.2024

It is notified for the information of all concerned that the **Third Professional BAMS Additional Supplementary Examination September 2024 (2008 Scheme - 2008 admission and 2007 admission and earlier) will be conducted for the following five candidates** as per University Order referred above. Applications shall be submitted by these candidates in conventional form, as per the schedule given below:

- 1.Britto.K.P, Sanithigiri Ayurveda Medical College, Palakkad
- 2.Ganga Pratheek G.S, Sanithigiri Ayurveda Medical College, Palakkad
- 3.Janapriya .M.S, Sanithigiri Ayurveda Medical College, Palakkad
- 4.Ambili.A.Gopinath, KMCT Ayurveda Medical College, Kozhikode
- 5.Aswathy Gopinath , Vaidyaratnam P.S Varier Ayurveda College, Kottakkal, Malappuram

| | |
|---|-------------------------|
| Last date for receipt of application in Pareeksha Bhavan without fine | 25.07.2024 |
| With a fine of Rs.190/- | 30.07.2024 |
| Date of commencement of Examination | will be announced later |

Application Fee - Rs.45/-

Semester wise Registration fee - Rs. 555/-

Examination fee -

i.Rs. 3,045/- per paper for a maximum of 5 papers

ii. Rs.1,105/- for each additional paper **subject to a maximum limit of ₹16,540/-** irrespective of the number of papers for which a candidate appears.

(original chalan should be submitted along with the application)

**Dr.Godwin Samraj D.P.
Controller Of Examinations**

To

The Principals of the Ayurveda Colleges concerned.

Copy to : PS to VC /PA to PVC/CE/ EX II/PRO/EPR I/Enquiry /AR,DR Concerned /Digital Wing / Monitoring Cell / SUVEGA



UNIVERSITY OF CALICUT

APPLICATION FOR EXAM (Month & Year)

REGULAR / IMPROVEMENT / SUPPLEMENTARY EXAM (Please ✓)

| | | | |
|--------------------------|--|----------------------|-------------|
| PHOTO (Passport Size) | Details of fee remitted | | |
| | Amount | Chalan Number | Date |
| | | | |
| | <i>Signature of the candidate</i> | | |
| | <i>Name and Designation of the Identifying Officer</i> | | |

| | | |
|--|---|--|
| Name of the course | : | |
| Main Subject | : | |
| Exam for which application is submitted (I year / II year/ III year) | : | |
| Register Number | : | |
| Centre of Exam | : | |
| Name of the candidate (in block letters) | : | |
| Mobile Number | : | |
| E-mail ID | : | |
| Address for communication (with PIN) | : | |
| Religion and Community | : | |
| Details of papers now applying Specify part /division /main /subsidiary | : | |

Paper 1 _____

Paper 9 _____

Paper 2 _____

Paper 10 _____

Paper 3 _____

Paper 11 _____

Paper 4 _____

Paper 12 _____

Paper 5 _____

Paper 13 _____

Paper 6 _____

Paper 14 _____

Paper 7 _____

Paper 15 _____

Paper 8 _____

Paper 16 _____

C U Campus

Date:

Signature of the Candidate