

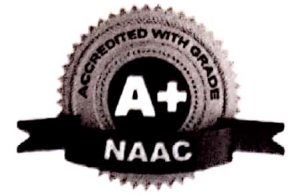


झारखण्ड केन्द्रीय विश्वविद्यालय

CENTRAL UNIVERSITY OF JHARKHAND

(भारतीय संसद के अधिनियम 2009 द्वारा स्थापित)  
(Established by an Act of Parliament of India in 2009)  
Homepage: <http://www.cuj.ac.in>

EXAMINATION SECTION



To,

Date: - / /20

**The Controller of Examinations**

Central University of Jharkhand, Ranchi

**Sub: - Request for Year Back – reg.**

Sir,

I \_\_\_\_\_ S/D/o \_\_\_\_\_ having  
registration no./ Enrollment No. \_\_\_\_\_ admitted under the  
course of \_\_\_\_\_ in the  
Department of \_\_\_\_\_ hereby informed that I  
have not completed 50% credit in Odd Semester /Even Semester Exams of 2<sup>nd</sup>/4<sup>th</sup>/6<sup>th</sup>/8<sup>th</sup>  
Semester.

(Give a tick mark as appropriate)

| 1st Year | Total<br>Credit | Total<br>Credit<br>Earned | 2nd<br>Year | Total<br>Credit | Total<br>Credit<br>Earned | 3rd<br>Year | Total<br>Credit | Total<br>Credit<br>Earned | 4th Year | Total<br>Credit | Total<br>Credit<br>Earned |
|----------|-----------------|---------------------------|-------------|-----------------|---------------------------|-------------|-----------------|---------------------------|----------|-----------------|---------------------------|
| 1st Sem  |                 |                           | 3rd Sem     |                 |                           | 5th<br>Sem  |                 |                           | 7th Sem  |                 |                           |
| 2nd Sem  |                 |                           | 4th Sem     |                 |                           | 6th<br>Sem  |                 |                           | 8th Sem  |                 |                           |
| Total    |                 |                           |             |                 |                           |             |                 |                           |          |                 |                           |

Therefore, I request you to kindly grant me year back and further continuation in courses as per  
the University guidelines.

(Full Signature of the Student with Date)

Contact No. \_\_\_\_\_

Email \_\_\_\_\_

Application duly recommended by

Remarks of the Head of the Department

Enclosures:

1. Copy of relevant Semester Marksheets.

