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**St. PETER'S UNIVERSITY**  
**St. Peter's Institute of Distance Education**  
 Chennai-600 054.

**II SEMESTER END ASSESSMENT, JANUARY 2011**  
 (Batch: 2009- 2010)

**EXAMINATION APPLICATION FORM**

Programme : **M.Sc. (Information Technology)**  
 Code No. :

|       |
|-------|
| PHOTO |
|-------|

**Code Number of Student Support Centre:**

|  |
|--|
|  |
|--|

1. Name in BLOCK LETTERS : \_\_\_\_\_  
 (as in the certificate)

2. Gender : Male/Female

3. Date of Birth : \_\_\_\_\_

4. Nationality : \_\_\_\_\_

5. Community : BC / MBC / SC / ST / OC

6. Father's Name : \_\_\_\_\_

7. Mother's Name : \_\_\_\_\_

8. Blood Group : \_\_\_\_\_

9. (a) Present Address with pin code : \_\_\_\_\_  
 (in BLOCK LETTERS)

PIN: \_\_\_\_\_

(b) Permanent Address with pin code : \_\_\_\_\_  
 (in BLOCK LETTERS)

PIN: \_\_\_\_\_

(c) Residential Telephone No. : \_\_\_\_\_ Mobile No. \_\_\_\_\_

(d) E-mail : \_\_\_\_\_

10. Particulars of Educational qualification:

| Qualifications | Board/College/<br>University | Month and year<br>of passing | Reg. No. | Average marks /Class |
|----------------|------------------------------|------------------------------|----------|----------------------|
|                |                              |                              |          |                      |

Note: Copies of the certificates and Transfer Certificate are to be enclosed.

11. (a) No. of papers in the End Assessment :

|                               | Theory | Practical |
|-------------------------------|--------|-----------|
| All the Papers in II Semester | 6      | 2         |
| Arrear papers in I Semester   |        |           |

(b) Total amount of Assessment Fee :

|                      |          |
|----------------------|----------|
| II Semester          | Rs. 1300 |
| I Semester (Arrear)* |          |
| Total                |          |

12. Details of Fees paid for End Assessment\* : Amount: Rs ..... DD No. ....  
 (DD in favour of 'St. Peter's University'  
 payable at Chennai is to be enclosed) Date of Payment:..... Bank and Place.....

13. I certify that all the above particulars given by me are correct.

Date:

Signature of the Student

Signature of the Director  
 St. Peter's Institute of Distance Education  
 (With Seal)

Signature of the Coordinator  
 (With Seal)

Note: The filled-in application is to be submitted to the Controller of Examination through Director,  
 St. Peter's Institute of Distance Education on or before 22.12.2010.

\*

| S.No. | Particulars of Fee      | Name of the Programme |
|-------|-------------------------|-----------------------|
|       |                         | PG<br>(Rs.)           |
| 1.    | Cost of Application     | 25                    |
| 2.    | Statement of Marks      | 25                    |
| 3.    | Theory (Per Subject)    | 150                   |
| 4.    | Practical (Per Subject) | 175                   |
| 5.    | Project                 | 400                   |