CEF-03

Leading University

Ragibnagar, Sylhet

Office of the Controller of Examinations

Application for Makeup Examinations

Student ID:			Student Name	
Semester-Year:	Spring/Summer/Fall/20		Department:	BuA/CSE/English?Law?EEE/I.Studies/Arch/Civil/P.Health/THM
Course Code:			Course Title:	
Date of Exam. Scheduled:		Course Teacher:		
Contact No of Student:			Examination:	☐ Mid Term ☐ Semester Final
1. Signature of Student with Date				2. Clearance of Office of the Controller of Exams Signature with Date:
3. Signature of Course Teacher:				Date and Time of make-up Examination (Course Teacher will fill this)
4. Signature of Head of the Department Date				5. Clearance of Finance and Accounts Date
Fees of Make-up Examination: i) Mid-Term Exam: 1000.00 Tk. ii) Final Exam: 1500.00 Tk. Make-up Examination for the same course.				
Leading University Admit Card For Make-up Examination				
Student ID:	Student ID: Dat			te and Time of Exam:
Student Name:			Co	urse Teacher:
Course Code:		Course Title:		1
Semester-Year: Spring/Summer/Fall/20 Examination: Mid Term Semester Final				