



Chowgule Education Society's
Parvatibai Chowgule College of Arts and Science
(Autonomous)

Accredited by NAAC with Grade 'A' (C.G.P.A Score 3.27 on a 4 Point Scale)
Best Affiliated College Goa University Silver Jubilee Year Award

Post Graduate Diploma in Computer Applications (PGDCA)
Repeat Semester I/II End Examination (SEE) Notification
(Academic Year 2023-24)

Students who wish to apply for the repeat Semester I/II End Examination (SEE) are required to submit their applications along with the prescribed fees to the Examination Cell on **28th September 2023 between 10.00 am and 11.00 am.**

16-09-2023



S. Prabhakar
Controller of Examinations

University Registration No. _____ Roll No. _____ Receipt No. _____

APPLICATION FORM FOR ADMISSION TO THE POST GRADUATE PROGRAMME SEMESTER END EXAMINATION

- N.B.** 1. Incomplete Application Forms and Applications submitted after the prescribed date are liable to be rejected.
2. Separate Forms to be used for each Semester.

To
The Controller of Examinations,
Parvatibai Chowgule College of Arts & Science (Autonomous), Margao - Goa

Sir,
I request to be examined in the following Core and Elective Courses for the ensuing **M.A. / M.Sc.** (Analytical Chemistry / English / Geography / Geoinformatics / Hindi / IT / Child Psychology & Child Development) / **P.G.D.C.A. / P.G.D.G.I.S. / P.G.D.C.G.M.L.T.** of the Semester _____ End Examination to be held in _____ 20___. (A.Y. 20__ - 20__)

Course Code	Nomenclature of the Course	Practical/ Theory	No. of Credits (if applicable)
Core Courses			
Elective Courses			

PERSONAL PARTICULARS

Name in Full (In Capital Letters) _____

(As entered at the time of enrolment/as entered in Bachelors Degree certificate)

Gender: _____ **Month and Year of Registration for the Programme:** _____

Month and Year of passing the previous Examination: _____

Address: _____ **Contact No:** _____

I declare that the information provided by me is correct to the best of my knowledge. I understand that my candidature of this examination is purely provisional, subject to the fulfillment of all the eligibility conditions and rules. I further declare that my candidature may be withdrawn by the Department/College as the case may be any time prior to the commencement of the examination if I do not fulfill all the conditions/rules prescribed in that behalf.

Signature of Applicant with date

Name: _____

- CERTIFICATE TO BE SIGNED BY THE HEAD OF THE DEPARTMENT/COORDINATOR OF THE COURSE

1) Certified that Mr./Ms. _____ has attended the programme and has kept terms as under:
_____ Semester Term from _____ (Month/Year) till date.

2) The candidate is eligible to appear for the examination. I recommend her/his admission to the ensuing examination.

Place: Margao

Date: _____

Signature of Head of the Department/Programme Coordinator with Seal

Details of Fee to be paid for Post Graduate Examination

Name of the student:

Programme:

Roll No:

Semester:

(A)

Sr. No.	Items	Amt.
1	Examination Registration Fee	₹. 380.00
2	Statement of Marks	₹. 100.00
	Total (A)	₹. 480.00

(B)

Sr. No.	Items	No. of credits	Total
1.	Theory Examination fee per credit = ₹. 100		
2.	Practical Examination fee per credit = ₹. 125		
3.	Dissertation (if applicable) (₹. 640)	-	
4.	Late Fee (₹. 325)	-	
		Total (B)	

Total (A+B): _____

Students signature

Coordinators Signature _____