

KRISHNA UNIVERSITY

Prof .Y.K.Sundara Krishna
Controller of Examinations



Rajupeta
Machilipatnam-521001
Phone No: 08672-220070
Fax: 08672-225960
Email: kuexams2010@yahoo.com

No.KRU/Exams/Notifications/B.Pharmacy/2014

Dated: 08-07-2014

NOTIFICATION

Applications are invited from the eligible candidates of 2010-11 batch for Supplementary Examinations (theory) of B.Pharmacy (from I semester to VIII Semester) students of Krishna University affiliated colleges for the academic year 2013-2014.

The following is the schedule of dates for payment of examination fee and receipt of filled in applications for **B.Pharmacy (I Semester to VIII Semester) theory Examinations**

S. No.	Description	Date
1	Last date for payment of examination fee and submission of filled in applications to the Principal concerned	15-07-2014
2	Last date for submission of galley in triplicate by the Principals to the Controller of Examinations, Krishna University	16-07-2014
3	Date of commencement of the written (Theory) examinations of B.Pharmacy	11-08-2014

The affiliated colleges shall pay their students examination fee for each course by way of a single consolidated payment through Online Challana to Examination Fee Account State Bank of India, A/C No.30629043551, Main Branch, Machilipatnam-521002 only.

Examination Fee Details:

a) Whole Examination fee (per semester)	:	Rs.4000-00
b) single paper appearance in one semester	:	Rs.1000-00
c) Two papers appearance in one semester	:	Rs. 2000-00
d) Three or more papers appearance in one semester	:	Rs. 4000-00

Examination Centre : **PB Siddhartha College of Arts & Science, Vijayawada**

The hall-tickets shall be issued to the candidates only after verifying their eligibility in all respects, and ensure that they are not under disqualification for suspected malpractice or any of those sorts. The hall-tickets shall be collected before the date of commencement of examinations i.e. on 09-08-2014, by the candidate at their respective college

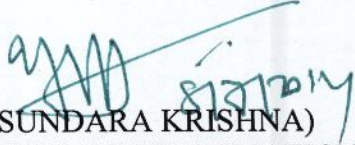
(P.T.O.)

Please send the galley in the prescribed format given below

S No	Name of the Candidate (as per SSC Certificate)	Parent Name (as per SSC Certificate)	S E X	Regd. No.	Appearing subjects	Elective (if any)	Fee amount & date	Remarks
1	2	3	4	5	6	7	8	9

Note: Registration means obtaining Hall-ticket for the said Examination.

(BY ORDER)


(Y.K.SUNDARA KRISHNA)
CONTROLLER OF EXAMINATIONS
Controller of Examinations
Krishna University-521 001

To

The Principals of concerned colleges

Copy to:

- 1) The Registrar's Table
- 2) The Vice- chancellor's Table
- 3) Krishna University Website
- 4) File

8/7/14