



DIRECTORATE OF EVALUATION
GANDHI INSTITUTE OF TECHNOLOGY AND MANAGEMENT
(GITAM)

(Declared as deemed-to-be-University)
VISAKHAPATNAM-530 045, (A.P)

EXAMINATION APPLICATION FORM

Supplementary Repeat Continuous Evaluation
(For Candidates with Backlogs)

Betterment Exam Special Exam Special Drive Exam

1. Name of the Candidate :
(as in SSC, in capital letters)

2. Registered No. :

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

3. Examination Appearing for : i) Month:Year:
ii) Program:..... iii) Branch:..... iv) Semester/Trimester.....

4. Courses applying for :

| S.No. | Course Code | Title of the course |
|-------|-------------|---------------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |

5. Campus : Visakhapatnam Hyderabad Bengaluru

6. Contact No: Mobile _____ Landline with STD _____
email Id :

7. Fee particulars: Enclose Original Challan/DD to the application.
In case of DD, write your name & Regd. No. on the reverse.

Amount paid: Rs. Challan/D.D No: Date of Payment:
Name of the Bank: Branch :

Place:
Date :

Signature of the Candidate

(For Office Use only)

Recommended Not recommended

Signature of
Head of the Department

Signature of
Principal/Director