KRISHNA UNIVERSITY

Prof .Y.K.Sundara KrishnaController of Examinations



Rajupeta Machilipatnam-521001 Phone No: 08672-220070

Fax: 08672-225960

Email: kuexams2010@yahoo.com

Date: 26-02-2015

No.KRU/Notifications/M.Pharmacy/2014

NOTIFICATION

Applications are invited from the eligible candidates for Examinations of M.Pharmacy I Semester students of Krishna University Campus and affiliated colleges for the academic year 2014-2015.

The following is the schedule of dates for payment of examination fee and receipt of filled in applications for M.Pharmacy I Semester Examinations

S. No.	Description	Date			
1	Last date for payment of examination fee and submission of filled in applications to the Principal concerned	06-03-2015 (Friday)			
2	Last date with late fee of Rs. <u>200/-</u> and submission of filled in applications to the Principals concerned	09-03-2015 (Monday)			
3	Last date for submission of galley in triplicate by the Principals to the Controller of Examinations, Krishna University	10-03-2015 (Tuesday)			
4	Date of commencement of the written (Theory) examinations of M.Pharmacy	06-04-2015 (Monday)			
5	Date of commencement of the Practical Examinations of M.Pharmacy	After completion of theory exams			

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	:	Rs. 1610-00
b) Examination fee for single paper appearance	:	Rs. 330-00
c) Two papers appearance	:	Rs. 640-00
d) Three or more papers appearance	:	Rs. 1610-00
e) Practical Examination Fee (for each practical)	:	Rs. 165-00

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 04-04-2015, 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)	Reser vation Category	Fee amount & date	0.0000000000000000000000000000000000000	
1	2	3	4	5	6	7	8	9	10	11

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

Note: Applications received after last date for submission shall not be considered.

(BY ORDER)

CONTROLLER OF EXAMINATIONS
Controller of Examinations

Krishna University-521 601.

The Principals of concerned colleges

Copy to:

To

1) The Registrar's Table

2) Krishna University Website

3) File