



Sant Dnyaneshwar Shikshan Sanstha's

ANNASAHB DANGE COLLEGE OF ENGINEERING AND TECHNOLOGY, ASHTA

(An Autonomous Institute affiliated to Shivaji University, Kolhapur)

Office of Controller of Examinations



Date: -

To,
The Controller of Examinations,
ADCET, ASHTA.

Sir / Madam,

I, the undersigned request you to kindly issue me the **Examination Application Form / Hall Ticket** as my **Examination Application Form / Hall Ticket** is lost / misplaced.

A) Academic Details :									
URN No.	:								
Candidate Name	:								
Branch Name	:								
Year (Tick ✓ at Appropriate Column)	:	First Year B. Tech.		Second Year B. Tech.		Third Year B. Tech.		Final Year B. Tech.	
Semester (Tick ✓ at Appropriate Column)	:	I	II	III	IV	V	VI	VII	VIII
Contact No.	:								
Email ID	:								
Detail of Month / Year of Examination	:								

Signature of Candidate

B) Controller of Examinations :	
Remark & Signature :	

C) Account Section :	
Received Rs. _____ (Rs. _____ Only) from the above student vide receipt No. _____ Dated _____	
Signature of Cashier	

D) Office of Controller of Examinations :	
Signature of Candidate Received Examination Application Form / Hall Ticket	:
Remark	: