



UNIVERSITY OF CALCUTTA

Centre Code: 514

Name of Examination			
University Roll No			
Registration No			
Subject			
Module/Group/Unit		Paper	
Full Marks			
Date of Examination			
Starting Time of Examination			

Question No	Marks Awarded	Question No	Marks Awarded
Total		Total	

.....
Signature of Examiner with Date

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Name of Examiner (CAPITAL LETTER)