The ICFAI University, Sikkim



Ref No.: IUS/GTK/DR/Cir/018

Circular

SUPPLEMENTARY EXAMINATION (EVEN Semester) 2020

GUIDELINES

LAST DATE OF SUBMISSION

20.06.2020

NO REQUESTS FOR SUPPLEMENTARY EXAMINATION WILL BE ACCEPTED AFTER 20.06.2020 FROM THE FINAL YEAR GRADUATING STUDENTS

- The Supplementary Examination is only for the Graduating (Passing out) Students.
- The students can opt for EVEN Semester courses only.
- Before applying for Supplementary Examination, the students are advised to check the courses being offered CAREFULLY. If in case, the courses are different, the student should inform the same to the Examination Department.
- Students are strictly advised to check their grade sheets before applying for the supplementary examination.
- The final year students are requested to fill the form as attach in Annexure I, scan in .pdf format only and share the scanned form to the examination department in the email id as mentioned below. The University shall not be held responsible for error in the filled forms.
- The requisite fees for improving the Grade [D or E] only and NC is Rs. 800/- and for RC is Rs. 3,000/-. Students are NOT ALLOWED to improve the Grade of Soft Skills-II, Management Thesis, Projects and Practical courses.
- It is COMPULSORY to opt for Supplementary Examination for NC and RC cases.
- Payment of supplementary examination fees needs to be deposited in the following bank account and share the deposit slip to <u>accounts@iusikkim.edu.in</u> writing your details thereon.

Account No.: 50200004990673 Bank Name: HDFC Bank IFS Code: HDFC0009399 SWIFT Code: HDFCINBB Branch: Tadong

• Any query with regard to the supplementary examination should be emailed to the Examination Department at <u>exams@iusikkim.edu.in</u>.



Annexure - I

APPLICATION FOR SUPPLEMENTARY EXAMINATION FOR UG & PG: 2020

,e	Name :
RECEIPT NO.:	Enrollment No :
	Program :
	Batch :
	E-Mail :
	Phone No :

То

The Examination Coordinator The ICFAI University, Sikkim

Dear Sir,

I wish to exercise my option to write Supplementary Examination for the following courses:

SI. No.	Course Code	Course Title	Semester	Existing Grade in Course
1				
2				
3				
4	5			
5				
6				
7				
8				
9		ž		
10				

I am aware of the rules governing the Minimum Academic Requirements and would abide by them.

Date:

Signature of the Student

For office use only

AMOUNT:

ENDORSED: YES / NO

Signature Authorised Signatory