



## **ICAR-CENTRAL INSTITUTE OF FISHERIES EDUCATION**

(University under Section 3 of UGC Act, 1956) Panch Marg, Off Yari Road, Versova, Mumbai-400 061, India

## OFFICE OF THE CONTROLLER OF EXAMINATIONS M.F.Sc. Re-evaluation\* Application Form

Name of Student :			Regn. No.:		
Programme : M.F.Sc.			Batch:		
Discip	line :		Division		
	Courses	for which th	e student is applying now for Re	e-evaluation	
Sr. No.	or II <sup>nd</sup> Sem.		Name of the Cour	Final Exam appeared in (Month & Year)	
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Deposi		(Dy. C	ture with date	(Signature of the Student)	
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Deposi		(Dy. C Signa	ture with date		
Deposi		(Dy. C Signa	ture with date HIER  Forwarded by HoD	Date :	
	SPACE F	(Dy. C Signa FOR DDO/CAS	ture with date HIER  Forwarded by HoD  (Sig	Date: nature of the Head of Division)	
One ti	SPACE F	(Dy. C Signa FOR DDO/CAS	ture with date HIER  Forwarded by HoD  (Sig	Date: nature of the Head of Division)	
One ti	me opportunity	(Dy. C Signa FOR DDO/CAS for every subj	ture with date HIER  Forwarded by HoD  (Sig	Date: nature of the Head of Division)	
One ti	SPACE F	(Dy. C Signa FOR DDO/CAS for every subj	ture with date HIER  Forwarded by HoD  (Sig	nature of the Head of Division)	