

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:			
Discipl	line :			Division			
	Courses	for which th	ne student is app	lying now for Re-eval	uation	Δ	
Sr. No.	Course No.	Course of I st Sem. or II nd Sem.	Name	e of the Course	La	Final Exam appeared in (Month & Year)	
2							
3							
4				65/2			
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Deposi	it Rs	(DV-C	OE/ Jt. COE/ COE) Hure with date				
SPACE FOR DO CASHIER					Signature Date :	of the Student)	
and in the second secon				Forwarded by HoD			
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* One ti To,	me opportunity	for every subj	ect				

The Controller of Examinations

ICAR-CIFE, Mumbai - 400 061

For Office Use Only

Processed by Read & Verified by Jt. CoE/ Dy. CoE **Controller of Examinations**