



**PONDICHERRY UNIVERSITY**  
**DIRECTORATE OF DISTANCE EDUCATION**  
**EXAMINATION WING**

Seal of Twinning Mode
Seal of Director of DDE
(Office Use Only)

**Part – I (to be filled by the candidate)**

Enrolment No. 

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Name of the Student: .....

Degree / Branch: ..... Year/Semester: .....

Subject Title: ..... Subject Code: .....

Date of Exam: ..... Session (F/N) No. of Pages Written: .....

.....  
**(Signature of the Student)**

**Part – II (Marks to be filled-in by the Examiner)**

Q. No.	Sub Division Marks				Total Marks	Q. No.	Sub Division Marks				Total Marks
	(a)	(b)	(c)	(d)			(a)	(b)	(c)	(d)	
Section A						Section B					
1						9					
2						10					
3						11					
4						12					
5						13					
6						14					
7						15					
8						16					
<b>Section A- Total (1-8)</b>						<b>Section B- Total (9-16)</b>					
Q. No.	Sub Division Marks				Total Marks	<b>Grand Total (A + B + C)</b> <b>(In Figures)</b>					
	(a)	(b)	(c)	(d)							
Section C						In Words: .....					
17											
<b>Section C -Total (17)</b>											

Name & Signature of the Chief Examiner / Chairman

Name & Signature of the Examiner (with Date)