

**SANT LONGOWAL INSTITUTE OF ENGINEERING AND TECHNOLOGY**  
**LONGOWAL, DISTT. SANGRUR (PUNJAB)**



(ESTABLISHED BY: GOVT OF INDIA)  
DEEMED TO BE UNIVERSITY

**EXAMINATION FORM FOR RETEST (UG and PG COURSES)**

SEMESTER \_\_\_\_\_ Month & Year \_\_\_\_\_

NAME \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

REGN. NO. \_\_\_\_\_ TRADE \_\_\_\_\_

CONTACT NO. \_\_\_\_\_ (MANDATORY)

**SUBJECTS IN WHICH RETEST IS REQUESTED**

S.NO.	SUB CODE	SUB NAME	PRESENT GRADE
1.			
2.			
3.			
4.			
5.			
6.			
7.			

AFFIX HERE A  
PASSPORT SIZE  
PHOTOGRAPH DULY  
ATTESTED BY CLASS  
COUNSELOR OR HOD  
CONCERNED

I have gone through the syllabus and regulations of the exams and understood the same for my eligibility for the exam. In case any discrepancy is found I shall be responsible for the consequences.

SIGNATURE OF STUDENT

Received fee of Rs. \_\_\_\_\_ vide receipt No. \_\_\_\_\_ dated \_\_\_\_\_

Cashier

DEALING CLERK

DY. REGISTRAR (ACADEMICS)

**SANT LONGOWAL INSTITUTE OF ENGINEERING AND TECHNOLOGY, LONGOWAL**  
**ADMIT CARD**

SEMESTER \_\_\_\_\_ Month & Year \_\_\_\_\_

NAME \_\_\_\_\_

REGN. NO. \_\_\_\_\_

**SUBJECT CODES**

1.	3.	5.	7.
2.	4.	6.	8.

AFFIX HERE A  
PASSPORT SIZE  
PHOTOGRAPH DULY  
ATTESTED BY CLASS  
COUNSELOR OR HOD  
CONCERNED

SIGNATURE OF THE STUDENT

DEPUTY REGISTRAR (ACADEMICS)