**Annexure M1**

Dean

Faculty of Agricultural Sciences

Dear Sir

**Application for Submitting Medical Certificates for Absence at the Semester Examinations in the Faculty of Agricultural Sciences**

1. Name with Initials : ....................................................................................................
2. Registration No : .........................................
3. EG No : .........................................
4. Year : .........................................

1. Semester : .........................................

|  |
| --- |
| **Details of the Subject Absent** |
| **Date/s of the Examination** | **Name of the Subject** | **Subject Code** |
|  |  |  |

Signature of Applicant : .........................................

Date : .........................................

**By-Law No. 03 of 1996 Pertaining to Examinations**

1. **Submitting Medical Certificates for Absence at Examination**
2. Internal candidates who absent themselves for the whole or part of an examination due to ill health should report to the Medical Officer of the University about it either before the commencement of the examination or during the examination time.
3. Candidates who fail to do so for unavoidable reasons must submit a medical certificate from a District Medical Officer or a Medical Officer attached to a government hospital, within 14 days of the commencement of the relevant examination (relevant subject) or part of the examination. Medical Certificates issued by private medical officers; ayurvedic physicians or homeopaths are not accepted.

**……………………………………….Office Use Only...…………………………………....**

Remarks:

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