



Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

Back Examination Form for Even Sem (2022-23)

Roll No.: 2215137220014
Course Name: B.Com. II Semester (CBCS)
Semester: 2

Student's Personal Details

Student's Name: ADARSH TRIPATHI
Father's Name: SHIVRAM TRIPATHI
Mother's Name: REETA TRIPATHI
Gender: MALE
Date of Birth: 2004-06-25
Category: GEN
Disability: NO



Student's Contact Details

Correspondence Address: KALANEE BUZURG
Permanent Address: KALANEE BUZURG
State : UTTAR PRADESH District : GORAKHPUR
Mobile No. : 8318455267 Alternate Mobile No. : 8318455267
Email ID: adarshtripathi09876@gmail.com Aadhar No.: 974499316362

Student's Fee Details

Mis No.: 7222235140202 Registration and Examination Fee(Rs): 500
Transaction Date.: 16/05/2023 00:00:00 Transaction No.: YCPN1891305504
Customer ID: 7222235140202_514 Payment Mode: ONLINE

Student's Subject List

S.No.	Exam Type	Subject Code	Subject Name
1	BACK	COM115	COMPUTERSIZED ACCOUNTING

Declaration by the Student

I SOLEMNLY DECLARE THAT ALL THE INFORMATION MADE ABOVE ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. IF ANY INFORMATION IS FOUND INCORRECT, MY CANDIDATURE CAN BE CANCELLED

Signature of Student's

Declaration by The College

CERTIFIED THAT SRI /KM / SMT.IS A BONAFIDE STUDENT OF .ALL THE DOCUMENTS OF QULIFYING EXAMINATIONS HAS BEEN VERIFIED, FOUND CORRECT AND REQUIRED DOCUMENTS ARE ATTACHED WITH THIS EXAMINATION FORM.ATTENDANCE IS MORE THAN 75% AND THE CANDIDATE IS ELIGIBLE FOR APPLIED EXAMINATION.

Signature of Office Assistant

Signature of Head/College Principal



Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

Back Examination Form for Even Sem (2022-23)

Roll No.: 2215137220018
Course Name: B.Com. II Semester (CBCS)
Semester: 2

Student's Personal Details

Student's Name: AJEET KUMAR MISHRA
Father's Name: RADHESHYAM MISHRA
Mother's Name: SUMITRA
Gender: MALE
Date of Birth: 2002-07-06
Category: GEN
Disability: NO



Student's Contact Details

Correspondence Address: BELHAR KALAN, 272125
Permanent Address: BELHAR KALAN, 272125
State : UTTAR PRADESH District : SANT KABEER NAGAR
Mobile No. : 8052313780 Alternate Mobile No. : 8052313780
Email ID: mishraajeet909@gmail.com Aadhar No.: 971234426872

Student's Fee Details

Mis No.: 722235140202 Registration and Examination Fee(Rs): 500
Transaction Date.: 16/05/2023 00:00:00 Transaction No.: YCPN1891305504
Customer ID: 722235140202_514 Payment Mode: ONLINE

Student's Subject List

S.No.	Exam Type	Subject Code	Subject Name
1	BACK	HND100	RASHTRA GAURAV (COMPULSORY)

Declaration by the Student

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Ajeet Kumar Mishra

Signature of Student's

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Signature of Office Assistant

Signature of Head/College Principal



Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

Back Examination Form for Even Sem (2022-23)

Roll No.: 2215137220023
Course Name: B.Com. II Semester (CBCS)
Semester: 2

Student's Personal Details

Student's Name: AMAN MISHRA
Father's Name: MURLI MISHRA
Mother's Name: PRITI DEVI
Gender: MALE
Date of Birth: 2004-07-21
Category: GEN
Disability: NO



Student's Contact Details

Correspondence Address: BHAWANI CHHAPER, GOPALGANJ, 841428
Permanent Address: BHAWANI CHHAPER, GOPALGANJ, 841428
State : BIHAR District : SIWAN
Mobile No. : 8957101034 Alternate Mobile No. : 8957101034
Email ID: officialaman155@gmail.com Aadhar No.: 894309081716

Student's Fee Details

Mis No.: 722235140202 Registration and Examination Fee(Rs): 500
Transaction Date.: 16/05/2023 00:00:00 Transaction No.: YCPN1891305504
Customer ID: 722235140202_514 Payment Mode: ONLINE

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S.No.	Exam Type	Subject Code	Subject Name
1	BACK	HND100	RASHTRA GAURAV (COMPULSORY)

Declaration by the Student

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fman mishra

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Signature of Office Assistant

Signature of Head/College Principal



Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

Back Examination Form for Even Sem (2022-23)

Roll No.: 2215137220082
Course Name: B.Com. II Semester (CBCS)
Semester: 2

Student's Personal Details

Student's Name: SACHIN KUSHWAHA
Father's Name: SANJAY KUMAR KUSHWAHA
Mother's Name: BINDU DEVI
Gender: MALE
Date of Birth: 2004-07-15
Category: GEN
Disability: NO



Student's Contact Details

Correspondence Address: ISMAILPUR WARD NO.67,273001
Permanent Address: ISMAILPUR WARD NO.67,273001
State : UTTAR PRADESH District : GORAKHPUR
Mobile No. : 8795889539 Alternate Mobile No. : 8795889539
Email ID: sachinkushwaha710@gmail.com Aadhar No.: 000000000000

Student's Fee Details

Mis No.: 722235140202 Registration and Examination Fee(Rs): 500
Transaction Date.: 16/05/2023 00:00:00 Transaction No.: YCPN1891305504
Customer ID: 722235140202_514 Payment Mode: ONLINE

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S.No.	Exam Type	Subject Code	Subject Name
1	BACK	COM115	COMPUTERSIZED ACCOUNTING

Declaration by the Student

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Signature of Office Assistant

Signature of Head/College Principal



Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

Back Examination Form for Even Sem (2022-23)

Roll No.: 2215137220089
Course Name: B.Com. II Semester (CBCS)
Semester: 2

Student's Personal Details

Student's Name: SHAILESH
Father's Name: VINOD KUMAR
Mother's Name: KISMATI DEVI
Gender: MALE
Date of Birth: 2003-10-17
Category: SC
Disability: NO



Student's Contact Details

Correspondence Address: DOHARIYA BAZAR
Permanent Address: DOHARIYA BAZAR
State : UTTAR PRADESH District : GORAKHPUR
Mobile No. : 6307097322 Alternate Mobile No. : 6307097322
Email ID: shaileshkumarg.k.p69@gmail.com Aadhar No. : 588396772778

Student's Fee Details

Mis No.: 722235140202 Registration and Examination Fee(Rs): 500
Transaction Date.: 16/05/2023 00:00:00 Transaction No.: YCPN1891305504
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Student's Subject List

S.No.	Exam Type	Subject Code	Subject Name
1	BACK	HND100	RASHTRA GAURAV (COMPULSORY)

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Signature of Head/College Principal



Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

Back Examination Form for Even Sem (2022-23)

Roll No.: 2215137220193
Course Name: B.Com. II Semester (CBCS)
Semester: 2

Student's Personal Details

Student's Name: SHREYA KUSHWAHA
Father's Name: LAXMAN JI KUSHWAHA
Mother's Name: MANJU KUSHWAHA
Gender: FEMALE
Date of Birth: 2002-04-13
Category: OBC
Disability: NO



Student's Contact Details

Correspondence Address: NAKI ROAD INFRONT OF J.J HOSPITAL
Permanent Address: NAKI ROAD INFRONT OF J.J HOSPITAL
State : UTTAR PRADESH District : GORAKHPUR
Mobile No. : 9305302350 Alternate Mobile No. : 9305302350
Email ID: likershubham370@gmail.com Aadhar No.: 662608387601

Student's Fee Details

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S.No.	Exam Type	Subject Code	Subject Name
1	BACK	COM113	BUSINESS MANAGEMENT-II

Declaration by the Student

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