

# Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur Registration and Examination Form for Even Sem(2022-23)

Form No.: 722000583
Roll No.: 2313217220001

Course Name: M.Sc. (Botany ) Il Semester

Semeter:

#### **Student's Personal Details**

Student's Name:UMME KULSUMFather's Name:ABDULLAH WAHIDIMother's Name:SHAHEDA KHATOON

Gender: FEMALE

Date of Birth: 02/02/2001 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: MASHRIQ PRESS, BASANTPUR KHAS, GORAKHPUR Permanent Address: MASHRIQ PRESS, BASANTPUR KHAS, GORAKHPUR WASHRIQ PRESS, BASANTPUR KHAS, GORAKHPUR KHAS, GO

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9621228912Alternate Mobile No. :9621228912Email ID:ummek1246@gmail.comAadhar No. :732836665054

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

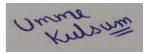
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## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

### **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



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000584
Roll No.: 2313217220002

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: DIVYA DUBEY

Father's Name: SADHU SHARAN DUBEY

Mother's Name: KUSUM DEVI Gender: FEMALE

Date of Birth: 03/08/2003 00:00:00

Category: GEN Disability: GEN



Correspondence Address: HIG 3-48, SIDDHARTHPURAM, VISTAR, TARAMANDAL ROAD, GORAKHPUR Permanent Address: HIG 3-48, SIDDHARTHPURAM, VISTAR, TARAMANDAL ROAD, GORAKHPUR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :6386524790Alternate Mobile No. :6386524790Email ID:ssdwivedi1963@gmail.Aadhar No. :760136492297

**Student's Fee Details** 

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

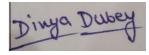
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## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000585
Roll No.: 2313217220003

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:MEENA GUPTAFather's Name:RAMPRASADMother's Name:GYANTI DEVIGender:FEMALE

Date of Birth: 28/07/2001 00:00:00

Category: OBC Disability: OBC



#### **Student's Contact Details**

Correspondence Address: VILLAGE- JAMUI PANDIT, MAHARAJGANJ
Permanent Address: VILLAGE- JAMUI PANDIT, MAHARAJGANJ

State :UTTAR PRADESHDistrict :MAHARAJGANJMobile No. :8800470503Alternate Mobile No. :8800470503Email ID:gupta.meena0075@gmaiAadhar No. :532056699706

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

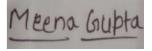
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## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000586
Roll No.: 2313217220004

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:VISHAKHA SINGHFather's Name:SHIVAJI SINGHMother's Name:SANGITA SINGHGender:FEMALE

Gender: FEMALE

Date of Birth: 15/07/2001 00:00:00

Category: GEN Disability: GEN



Correspondence Address: VILLAGE- HAULI BALIA, POST- PACHRUKHA, DISTRICT- DEORIA
Permanent Address: VILLAGE- HAULI BALIA, POST- PACHRUKHA, DISTRICT- DEORIA

State :UTTAR PRADESHDistrict :DEORIAMobile No. :8429120302Alternate Mobile No. :8429120302Email ID:vishakhashrinet@gmaiAadhar No. :542598183466

**Student's Fee Details** 

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

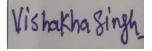
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000587
Roll No.: 2313217220005

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:GARIMA SRIVASTAVAFather's Name:AJEET KUMAR SRIVASTAVAMother's Name:SARITA SRIVASTAVA

Gender: FEMALE

Date of Birth: 27/09/2001 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: EWS-173, LALITA PURAM GORAKHPUR
Permanent Address: EWS-173, LALITA PURAM GORAKHPUR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9305602227Alternate Mobile No. :9305602227Email ID:garima270900@gmail.cAadhar No. :319015359270

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000588
Roll No.: 2313217220006

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: KM ANUPRIYA TIWARI
Father's Name: MITHILESH NATH TIWARI

Mother's Name: MANJU DEVI Gender: FEMALE

Date of Birth: 12/08/2002 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: HN 20, VILL- AMAWA BUZURG, POST- KUNERSTHAN, Permanent Address: HN 20, VILL- AMAWA BUZURG, POST- KUNERSTHAN,

State :UTTAR PRADESHDistrict :KUSHI NAGARMobile No. :6394845530Alternate Mobile No. :6394845530Email ID:anupriyatiwari2002@gAadhar No. :279034034166

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

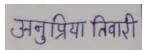
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000589
Roll No.: 2313217220007

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SHREE NIDHI SINGHFather's Name:ASHOK KUMAR SINGH

Mother's Name: NEERA SINGH
Gender: FEMALE

Date of Birth: 29/01/2000 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: SAKET NAGAR, KHARJARWA ROAD, Permanent Address: SAKET NAGAR, KHARJARWA ROAD,

State :UTTAR PRADESHDistrict :DEORIAMobile No. :8881694538Alternate Mobile No. :8881694538Email ID:singhshreenidhi@gmaiAadhar No. :592404142129

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

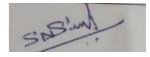
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## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000590
Roll No.: 2313217220008

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:VIJAY MISHRAFather's Name:PRAMOD MISHRAMother's Name:PARVATI MISHRA

Gender: MALE

Date of Birth: 10/10/2002 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: VILLAGE AND POST- BELWA TIKAR
Permanent Address: VILLAGE AND POST- BELWA TIKAR

State :UTTAR PRADESHDistrict :MAHARAJGANJMobile No. :8127796584Alternate Mobile No. :8127796584Email ID:mishravijay4848@gmaiAadhar No. :638833716362

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

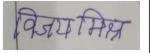
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## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

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Signature of Student's

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000591
Roll No.: 2313217220009

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

 Student's Name:
 KM SHWETA NAYAK

 Father's Name:
 DHANUSH DHARI NAYAK

Mother's Name: SEEMA NAYAK
Gender: FEMALE

Date of Birth: 01/04/2002 00:00:00

Category: ST Disability: ST



Correspondence Address: VILLAGE- CHAWARIA BUZURG, KAURIRAM Permanent Address: VILLAGE- CHAWARIA BUZURG, KAURIRAM

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9559537304Alternate Mobile No. :9559537304Email ID:nayakshweta145@gmailAadhar No. :242502503405

**Student's Fee Details** 

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489843678

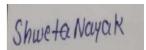
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000592
Roll No.: 2313217220010

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:ROSHANI PANDEYFather's Name:DINESH PANDEYMother's Name:REETA DEVIGender:FEMALE

Date of Birth: 08/07/2002 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: VILLAGE- SIDHUAPAR, POST-BARAHALGANJ Permanent Address: VILLAGE- SIDHUAPAR, POST-BARAHALGANJ

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :8188915438Alternate Mobile No. :8188915438Email ID:roshanipandey930@gmaAadhar No. :270893929289

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

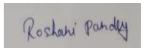
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5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

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Signature of Student's

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000593
Roll No.: 2313217220011

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:ANCHAL SINGHFather's Name:DEENDAYAL SINGHMother's Name:RENU SINGHGender:FEMALE

Date of Birth: 01/01/2001 00:00:00

Category: OBC Disability: OBC



Correspondence Address: VILLAGE- TAJPIPRA, PIPARAICH Permanent Address: VILLAGE- TAJPIPRA, PIPARAICH

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9935438686Alternate Mobile No. :9935438686Email ID:anchalsingh54@gmail.Aadhar No. :981123990309

**Student's Fee Details** 

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

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3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

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Anchal Singh

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



# Registration and Examination Form for Even Sem(2022-23)

Form No.: 722000594
Roll No.: 2313217220012

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SAVITA MAURYAFather's Name:RAJKUMAR MAURYAMother's Name:GYANTI DEVIGender:FEMALE

Date of Birth: 15/07/2002 00:00:00

Category: OBC Disability: OBC



Correspondence Address: VILL+ POST- SUKARAULI BAZAR
Permanent Address: VILL+ POST- SUKARAULI BAZAR

State :UTTAR PRADESHDistrict :KUSHI NAGARMobile No. :7317490175Alternate Mobile No. :7317490175Email ID:savitamaurya9793@gmaAadhar No. :905900157300

**Student's Fee Details** 

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

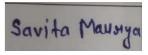
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **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



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000595
Roll No.: 2313217220013

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: SHIVANI SINGH

Father's Name: MANOJ KUMAR SINGH

Mother's Name: RITA SINGH Gender: FEMALE

Date of Birth: 22/07/2002 00:00:00

Category: OBC Disability: OBC



#### **Student's Contact Details**

Correspondence Address: VIL- PATKHAULI, POST- SISWA BZAR
Permanent Address: VIL- PATKHAULI, POST- SISWA BZAR

State :UTTAR PRADESHDistrict :MAHARAJGANJMobile No. :7388789458Alternate Mobile No. :7388789458Email ID:shivanisinghshivani7Aadhar No. :361898139634

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

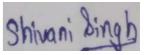
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000596 Roll No.: 2313217220014

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SHREYA PANDEYFather's Name:ARUN KUMAR PANDEYMother's Name:SODHA PANDEY

Gender: FEMALE

Date of Birth: 05/07/2001 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: HN-696, NORTH HUMAYUPUR OPPOSITE Permanent Address: HN-696, NORTH HUMAYUPUR OPPOSITE

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9264989834Alternate Mobile No. :9264989834Email ID:pandeyshreya312@gmaiAadhar No. :341566857051

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

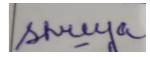
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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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



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000597
Roll No.: 2313217220015

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: KM KRITI TRIPATHI

Father's Name: KRISHN KUMAR TRIPATHI
Mother's Name: SATYA BHAMA TRIPATHI

Gender: FEMALE

Date of Birth: 22/08/2002 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: VILLAGE- BELADAR, POST-HATASHIVPUR

Permanent Address: VILLAGE- BELADAR, POST-HATASHIVPUR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :7275952738Alternate Mobile No. :7275952738Email ID:krititripathi979@gmaAadhar No. :681324704326

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

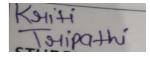
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# Registration and Examination Form for Even Sem(2022-23)

Form No.: 722000598
Roll No.: 2313217220016

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SARVESH KUMAR YADAVFather's Name:NAND LAL YADAVMother's Name:CHITRAKALA DEVI

Gender: MALE

Date of Birth: 11/02/1998 00:00:00

Category: OBC Disability: OBC



#### **Student's Contact Details**

Correspondence Address: VILLAGE AND POST- KUSMAUL
Permanent Address: VILLAGE AND POST- KUSMAUL

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9369006145Alternate Mobile No. :9369006145Email ID:ysarvesh69@gmail.comAadhar No. :478836922898

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **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

Saruesh Yadav

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



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000599
Roll No.: 2313217220017

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SANJALI SRIVASTAVAFather's Name:SANJAY SRIVASTAVAMother's Name:SUNITA SRIVASTAVA

Gender: FEMALE

Date of Birth: 05/12/1999 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: H N. -16M, NEW COLONY, MADHOPUR Permanent Address: H N. -16M, NEW COLONY, MADHOPUR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :6307448780Alternate Mobile No. :6307448780Email ID:sanjalisrivastava122Aadhar No. :348271263463

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

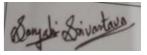
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **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**

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Signature of Office Assistant



# Registration and Examination Form for Even Sem(2022-23)

Form No.: 722000600
Roll No.: 2313217220018

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: AMRITA SINGH

Father's Name: ASHOK KUMAR SINGH Mother's Name: RANJOO SINGH

Gender: FEMALE

Date of Birth: 02/05/2003 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: H N- I/13, PWD COLONY, KALI MANDIR, GOLGHAR

Permanent Address: H N- I/13, PWD COLONY, KALI MANDIR, GOLGHAR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :7880989905Alternate Mobile No. :7880989905Email ID:amritasingh14440@gmaAadhar No. :301611902176

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

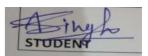
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000601
Roll No.: 2313217220019

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: RENU SAHANI

Father's Name: RAMHOSHILA SAHANI

Mother's Name: LAXMI DEVI Gender: FEMALE

Date of Birth: 13/03/2003 00:00:00

Category: OBC Disability: OBC

#### **Student's Contact Details**

Correspondence Address: VILLAGE-RAJDHANI, GORAKHPUR Permanent Address: VILLAGE-RAJDHANI, GORAKHPUR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :7880478797Alternate Mobile No. :7880478797Email ID:ranjitkumar05594@gmaAadhar No. :797465560372

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

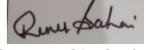
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



Gender:

# Deen Dayal Upadhyaya Gorakhpur University, Gorakhpur

# Registration and Examination Form for Even Sem(2022-23)

Form No.: 722000602 Roll No.: 2313217220020

**Course Name:** M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: **GARIMA MISHRA** Father's Name: SHAILENDRA MISHRA Mother's Name: SEEMA MISHRA

**FEMALE** Date of Birth: 19/12/1999 00:00:00

Category: **GEN** Disability: GEN

#### **Student's Contact Details**

BHATPAR RANI, DEORIA Correspondence Address: BHATPAR RANI, DEORIA Permanent Address:

UTTAR PRADESH State: **DEORIA** District: Mobile No.: 9918816584 9918816584 Alternate Mobile No. : Email ID: garimamishra1906@gma Aadhar No.: 780937469788

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

Customer ID: 7221233220609\_322 Payment Mode: **ONLINE** 

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
4	ZOO540	INTEGRATED PEST MANAGEMENT
5	BOT509	CYTOLOGY AND GENETICS
6	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
7	BOT511	PRACTICAL

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722000603
Roll No.: 2313217220021

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: GAUSE AZAM

Father's Name: AMANUDDIN ANSARI Mother's Name: HASIBUN NISHA

Gender: MALE

Date of Birth: 03/08/2000 00:00:00

Category: OBC Disability: OBC



#### **Student's Contact Details**

Correspondence Address: VILLAGE- MURERI GARAHWA, POST- PIPRAICH Permanent Address: VILLAGE- MURERI GARAHWA, POST- PIPRAICH

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9519670472Alternate Mobile No. :9519670472Email ID:nawajalam405@gamil.cAadhar No. :971931798943

**Student's Fee Details** 

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# Registration and Examination Form for Even Sem(2022-23)

Form No.: 722000624
Roll No.: 2313217220022

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SAKSHI SHAHIFather's Name:RAJKUMAR SHAHIMother's Name:SINDHU SHAHIGender:FEMALE

Date of Birth: 28/11/2001 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: AHIRAULI
Permanent Address: AHIRAULI

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :7355714281Alternate Mobile No. :7355714281Email ID:sakshishahi2811@gmaiAadhar No. :595342255466

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1489840990

Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **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**

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722001185
Roll No.: 2313217220023

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SHREYA SINGHFather's Name:SUKESH SINGHMother's Name:RENU SINGHGender:FEMALE

Date of Birth: 26/08/2003 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: NANDAPAR MAHARAJGANJ
Permanent Address: NANDAPAR MAHARAJGANJ

State :UTTAR PRADESHDistrict :MAHARAJGANJMobile No. :6393491047Alternate Mobile No. :6393491047Email ID:SHREYASINGH8220@GMAIAadhar No. :703282550173

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1491543281

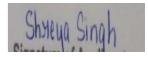
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **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



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722001188
Roll No.: 2313217220024

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name: NIYATI SRIVASTAVA

Father's Name: VINOD KUMAR SRIVASTAVA

Mother's Name: NISHA SRIVASTAVA

Gender: FEMALE

Date of Birth: 12/02/2002 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: SANTOSHNAGAR LACCHIPUR

Permanent Address: SANTOSHNAGAR LACCHIPUR

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :7800021144Alternate Mobile No. :7800021144Email ID:SRIVASTAVANIYAti457@Aadhar No. :860289825963

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1491543281

Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722001191
Roll No.: 2313217220025

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:DISHA SINGHFather's Name:DHARMDEV SINGHMother's Name:GEETA DEVIGender:FEMALE

Date of Birth: 26/08/2003 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: INDUPUR, DEORIA
Permanent Address: INDUPUR, DEORIA

 State :
 UTTAR PRADESH
 District :
 DEORIA

 Mobile No. :
 9696451391
 Alternate Mobile No. :
 9696451391

 Email ID:
 DS677811@GMAIL.COM
 Aadhar No. :
 423464285716

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1491543281

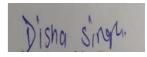
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
1	BOT507	ANGIOSPERMS I: TAXONOMY AND BIOSYSTEMATICS
2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

## **Declaration by The College**

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Signature of Office Assistant



# Registration and Examination Form for Even Sem(2022-23)

Form No.: 722001192
Roll No.: 2313217220026

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:SHAMBHAVI SRIVASTAVAFather's Name:RAJNIKANT SRIVASTAVAMother's Name:RASHMI SRIVASTAVA

Gender: FEMALE

Date of Birth: 05/08/2001 00:00:00

Category: GEN Disability: GEN



#### **Student's Contact Details**

Correspondence Address: RAJENDRA NAGAR,GORAKHNATH
Permanent Address: RAJENDRA NAGAR,GORAKHNATH

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :9580750025Alternate Mobile No. :9580750025Email ID:SHANBHAIS181@GMAIL.CAadhar No. :227404746443

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1491543281

Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

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3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
5	BOT511	PRACTICAL
6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

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Signature of Office Assistant



# **Registration and Examination Form for Even Sem(2022-23)**

Form No.: 722001193
Roll No.: 2313217220027

Course Name: M.Sc. (Botany ) II Semester

Semeter:

#### **Student's Personal Details**

Student's Name:ADITYA YADAVFather's Name:ARUN YADAVMother's Name:PREMSHEELA YADAV

Gender: MALE

Date of Birth: 11/04/2003 00:00:00

Category: OBC Disability: OBC



#### **Student's Contact Details**

Correspondence Address: GRAM RAJABARI
Permanent Address: GRAM RAJABARI

State :UTTAR PRADESHDistrict :GORAKHPURMobile No. :7398963503Alternate Mobile No. :7398963503Email ID:AY6948904@GMAIL.COMAadhar No. :788021296083

#### **Student's Fee Details**

MIS No.: 7221233220609 Paid(Reg and Examination): 1550

Transaction Date: 08/02/2023 15:49:01 Transaction No.: YCPN1491543281

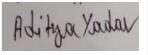
Customer ID: 7221233220609\_322 Payment Mode: ONLINE

## **Student's Subject List**

S.No.	Subject Code	Subject Name
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2	BOT508	ANGIOSPERMS II: MORPHOLOGY, EMBRYOLOGY AND ANATOMY
3	BOT509	CYTOLOGY AND GENETICS
4	BOT510	SOIL SCIENCE AND PHYTOGEOGRAPHY
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6	BOT512	INDUSTRIAL TRAINING/SURVEY/RESEARCH PROJECT*
7	ZOO540	INTEGRATED PEST MANAGEMENT

#### **Declaration by the Student**

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Signature of Student's

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Signature of Office Assistant