

**CHANAKYA NATIONAL LAW UNIVERSITY**  
**Nyaya Nagar, Mithapur, Patna**


Letter No.-CNLU/Univ.Exam.Notice/261/2021- 34(c)

Date: 29.05.2021

**Examination Notice**

The students of LL.M. (1<sup>st</sup> Semester) & ( B.A., LL.B. (Hons.) & B.B.A., LL.B. (Hons.) (1<sup>st</sup> Semester) are hereby informed that they can view their Answer Books of Repeat End Semester Examination, April, 2021 after submitting Application from 31.05.2021 to 01.06.2021 (07:00 AM to 11:00 AM). The students can view their Answer Books from 02.06.2021 & 03.06.2021 (07:00 AM to 11:00 AM). No application for viewing shall be accepted after 01.06.2021.

The application for re-evaluation of Answer Books of Repeat End Semester Examination, April, 2021 for all the above Semester can be submitted up to 05.06.2021. The fee for re-evaluation is ₹ 1,000/- per paper. No application for re-evaluation shall be accepted after 05.06.2021.

  
Controller of Examinations

- Enclosure – 1. Application Format for Viewing the Answer Script.  
2. Application Format for Re- evaluation of Answer Script.

Copy forwarded to: Hon'ble Vice Chancellor, Registrar office, for information and record.

# Chanakya National Law University

Nyaya Nagar, Mithapur, Patna

## APPLICATION FORM FOR VIEWING ANSWER BOOKS

B.A., LL.B. (Hons.)  B.B.A., LL.B. (Hons.)  LL.M.

NAME OF THE CANDIDATE .....

ROLL NO. .... SEMESTER .....

SESSION .....

END SEM EXAMINATION:  REPEAT END SEM EXAMINATION:

### NAME OF THE PAPER/S ( To be filled in by the Candidate)

- 1..... SEMESTER .....
- 2..... SEMESTER .....
- 3..... SEMESTER .....
- 4..... SEMESTER .....
- 5..... SEMESTER .....
- 6..... SEMESTER .....

TOTAL NUMBER OF PAPERS ..... (in word) .....

DATE .....

SIGNATURE OF CANDIDATE

# Chanakya National Law University

Nyaya Nagar, Mithapur, Patna

## APPLICATION FORM FOR RE-EVALUATION OF ANSWER BOOK

B.A., LL.B. (Hons.)  B.B.A., LL.B. (Hons.)  LL.M.

NAME OF THE CANDIDATE .....

ROLL NO. .... SEMESTER .....

SESSION .....

END SEM EXAMINATION:  REPEAT END SEM EXAMINATION:

### NAME OF THE PAPER/S ( To be filled in by the Candidate)

1..... SEMESTER .....

2..... SEMESTER .....

3..... SEMESTER .....

4..... SEMESTER .....

5..... SEMESTER .....

6..... SEMESTER .....

TOTAL NUMBER OF PAPERS ..... (in word) .....

RE-EVALUATION FEE (in figure) Rs. .... (in word) Rs.....

TOTAL FEE ( in figure) Rs. .... (in word) Rs.....

DATE .....

SIGNATURE OF CANDIDATE

### FOR OFFICE USE

Fee Paid Rs..... MR. No..... Date .....

DATE .....

SIGNATURE OF RECEIVER