Academic Regulation Form No.PG-18 *Vide* Clause: 3.05.02

## ASSAM AGRICULTURAL UNIVERSITY

Faculty: ..... College:....

## MARK CUM GRADE SHEET-IV (Ph.D)

## (SEMESTER FINAL/REPEAT /MAKE UP EXAMINATION)

Department of:		Class:
Semester: Session:		
Course No.:	_Credit hours:	
Title of the Course:		
Name of the Course Instructor:_		

Roll.No	Name	Theory	Practical	Grand total	% of marks	Grade
		(100)	(100)	(200)		(in 3 decimal only)

Signature of course teacher

Signature of course leader Signature of the HoD

Signature of the I/C Academic Cell

Signature of DPGS