

**PARLE TILAK VIDYALAY ASSOCIATION'S
MULUND COLLEGE OF COMMERCE**

FOR ALL UG & PG COURSES

SEMESTER-I / II / III / IV / V / VI ADDITIONAL EXAM FORM

**(For students who have not appeared for the regular exam due to medical / any
other reason)**

Student Name	
Class /Roll No/Division	
Course	
Semester	
Date of examination	
Subjects	
Reason for not appeared for exam	
Mobile Number	

To,
The Principal
Mulund College of Commerce,
Mulund West

Date:-

Madam,

I request you to kindly permit me to appear for the re-examination which will be

held on _____ (Month & year)

Yours faithfully,

Examination chairperson

Signature of student

(Note:-Please attach medical certificate if applicable.)