

Bikaner Technical University

(To be pasted on the outer envelope containing answer books and one copy be put inside the packet)

Name of college/ Centre Code.....

Name of Examination.....

Subject.....Subject Code.....

Date of Examination.....

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Bikaner Technical University

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(To be pasted on the packet being sent to the CoE office of University)

To,

The Controller of Examination
Bikaner Technical University
Karni Industrial Area, Pugal Road,
BIKANER-334004

Seal of Centre Code:

From:-

Centre Name:

Centre Address:

Contact No.:

(To be pasted on the packet being sent to the Examination Section of University)

To,

The Controller (Examination)
Bikaner Technical University
Karni Industrial Area, Pugal Road,
BIKANER-334004

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