



भारतीय आईटी एवं कौशल विकास संस्थान

Indian Institute of IT & Skill Development

Website: www.iiitsd.org ! Email: info@iiitsd.org ! TollFree: 857-2867-438 ! Telephone 98961-03827,70829-32998

APPLICATION FOR EXAM CENTRE REQUEST

1. Name & Code of Regional Centre : _____
2. Name & Code of Academic Course : _____
3. Session/ Year : _____
4. Requested Examination Centre : _____

Reason (s) why to make Examination Center :

We hereby declare that the information provided above is true and to the best of my knowledge. In the event of any of above information is found wrong or misleading; we shall be liable for appropriate action. The decision of the IIITSD regarding this request will be final and binding on us.

Authorized Signatory (AC): _____ Seal of the Academic Centre

Mandatory Requirements for Exam Centre

- Proper Desk & chair Seating Arrangements for student Exam
- Proper Fan & Electricity Supply During Examination Period
- Proper Water Arrangements for Students During Examination Period
- Appoint Well Qualified and Eligible Examiner for Student Exam
- First Aid Facility Available During Examination Period

FOR OFFICIAL USE ONLY

Exam Centre Allowed: Yes /No. If Yes, Exam Centre Code: _____

Exam Centre Name & Location: _____

Sd/-

Controller of Examination