

**MASTER OF …………………………………………**

**MID/END SEMESTER EXAMINATION**

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| **Academic Year: ……………………** | | |  | | **Semester: …………..……………..** | | |
| **Course Code: ………………………** | | |  | | **No. of Credits: ……………………** | | |
| **Course Title: …………………………………………………………………………………………..** | | | | | | | |
| **Examination Date: …………………………..** | | | | **Examination Center: ………………………...…..** | | | |
| **No. of Question Papers: ………………...** | | | | | | | |
| **Examination Branch (Name/Signature/ Date)** | **Supervisor** | | | | | | |
| **Name** | | | | **Date Received** | **Signature** | |
| Delivered: |  | | | |  |  | |

**PGIS/M/EXAMINATIONS/LABEL-2**