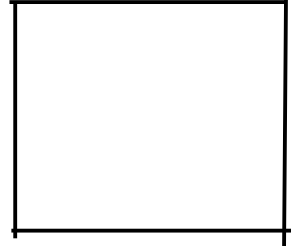




Directorate of Distance Education
VIDYASAGAR UNIVERSITY

MIDNAPORE - 721102
M.A. / M.Com. / M.Sc., PART - I / PART - II



Renewal Form

Enrolment No.Subject.....

Name

Father's Name

Permanent Address

.....

.....

Mailing Address.....

.....

.....

Contact No

Dated Rs

1st /2nd Renewal : year

.....



Directorate of Distance Education
VIDYASAGAR UNIVERSITY

MIDNAPORE - 721102

Receipt

Received from Shri / Sm.....

S/o. / D/o.

Enrolment No.Registration No.

Of.....the sum of Rs.as Renewal Fee

paid by Bank Draft / Challan No. Dated.....

Dated :

Office Assistant
D.D.E.