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| |  | | --- | |  | |  | **Form 1**  **Receiving Exam paper**  **CS & IT Dep’t.**  **Spring 2017**   |  | | --- | |  | | |  |  |  |  |
| **Form 1**  **Receiving Exam paper**  **Faculty Name :** | | |  | | | | |
| **S. No** | **Course Name & Code** | **Total Students** | | **Exam Day and Date** | **Number of Answer Sheets** | **Signature** | |
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