

UNIVERSITY OF CALICUT

Pareeksha Bhavan

No. 32556/SSE-ASST-1/2017/PB

Dated, 03.08.2018

NOTIFICATION

It is notified for the information of all concerned that **First, Second, Third and Fourth year BSc Nursing Special Supplementary Examinations, September 2018, for the chance exhausted candidates of 2002 (AD), 2003 (AE), 2004 (AF) & 2005 (AG) admissions** will be conducted by the University, after obtaining an affidavit from the students that they are taking the examination just to complete the course on their request and there will be no claim for any other benefits and that they will not raise any claim/complaint against the University. (Format of affidavit to be submitted is attached herewith)

The candidates should submit request to the undersigned, seeking permission to apply for the examination, enclosing an affidavit (on stamp paper worth ₹ 100/- duly attested by a Notary Public in the prescribed format) to the effect that they are taking the examination just to complete the course on their request and there will be no claim for any other benefits and that they will not raise any claim/complaint against the University. The candidate can apply for the examination only after getting permission. Applications submitted for the examination without getting permission will be rejected.

1. Last date for receipt of applications in the **conventional form** (separate applications for each year) with **chalan receipts : on or before 31.08.2018**
2. Date of commencement of examination: Will be announced later
3. Examination fee: ₹ 2,625/- per paper.
4. Examinations are conducted **only for theory papers** and no such examinations under special supplementary scheme will be conducted for Practical/Viva/Seminar/Project/Internal etc.
5. There is **no provision for photocopy/revaluation/scrutiny/recounting of the answer scripts** in respect of special supplementary examinations.
6. There will **not be moderation** for the special supplementary examination.
7. Centre of Examination : **Calicut University Campus.**
8. Mode of Payment of Fee: Candidates should make the payment of fee through the University Chalan Counter or through e-payment/e-chalan with SBT, Akshaya Centres and Friends Janasevana Kendra. No other mode of payment is acceptable. (Purpose for online payment is "EXOF001 Examination Fee Offline")
9. Candidates should **attach copies of marklists** of previous appearances with the application. They should **provide correct address with PIN code, Telephone number and e-mail ID** in the application. The address for submitting application is "The Controller of Examinations, Special Supplementary Examination Unit, Pareeksha Bhavan, Calicut University PO, 673 635", Ph:0494 2407367
10. The schedule of examination will not be intimated to the candidates individually. The time table will be published in the University website (www.universityofcalicut.info) in the link "**Time Table**". The applicants are requested to visit the University website for further notifications/information in this regard. The hall tickets for the examinations will be issued from Praeksha Bhavan after publication of the time table.

Sd/-

Controller Of Examinations

To

The Principals of all Nursing Colleges affiliated to Calicut University

Copy to: CE's Section/ PS to VC/ PA to PVC/ PA to CE/ EX II Section/PRO with request to issue a press release/ Digital Wing/Enquiry Section/ All University Information Centres/JCE, EPR Branch/EG - I/ Tappal Section.

FORM OF DECLARATION/ UNDERTAKING

I,.....S/o
.....aged.....years,residing at.....
..... solemnly affirm and states as under:

1) that I understand, my chances of regular appearance and supplementary appearance of BSc Nursing Exams have been exhausted and that the present chance to appear for the examination is a mercy chance under special supplementary scheme provided by the University on my request to provide a chance to complete the programme. I also understand that the University of Calicut has the authority and privilege to reject the application or to review the decision to conduct the examination at any stage without assigning any reason for the same.

2) I also undertake that granting this mercy chance and issuing of Mark List and other documents and awarding the degree thereafter by the University of Calicut do not entitle me to claim registration with Kerala Nurses & Midwives Council since, Indian Nursing Council (I.N.C) has prescribed its own time limit to complete a nursing degree to grant registration. Acceptance of my application and thereafter awarding degree, if successfully completed, cannot alter those norms of I.N.C for Registration.

3) I also undertake that I am applying for the examination knowing fully well the fact that the appearance and the degree secured accordingly are not as per the I.N.C norms and on my own risk. I also certify that I will not raise any claim against the University of Calicut for having given me this mercy chance to complete my nursing programme nor will I submit any complaint to any authority or file any petition in any court of law against the University in this regard and that I will not

make any claim against University for any consequences arising out of the University granting the mercy chance.

Signature:

VERIFICATION

I do hereby affirm that the above statement made by me voluntary and it is true and correct to the best of my knowledge and belief and to enable me to complete my nursing programme.

Signature

Name :

Date:

To be get signed before a Notary Public.