



SRM VALLIAMMAI ENGINEERING COLLEGE

(An Autonomous Institution)

SRM NAGAR, KATTANKULATHUR – 603 203



Register Number																			
Name of the Candidate																			
Degree																			
Branch														Semester					
Question Paper Code																			
Subject Code																			
Subject Name																			
Date		DD		MM		YYYY		Session		FN <input type="checkbox"/>		AN <input type="checkbox"/>							
No. of Pages used						In words													
All particulars given above by me are verified and found to be correct.																			
Signature of the student with date																			
<u>FOR OFFICE USE ONLY</u>																			
Part – A					Part – B														
Question No.	✓	Marks	Question No.	a	✓	Marks			Total										
						i	ii	iii											
1.			11.	a															
2.				b															
3.			12.	a															
4.				b															
5.			13.	a															
6.				b															
7.			14.	a															
8.				b															
9.			15.	a															
10.				b															
Total		Part – C																	
		16	a																
			b																
Grand Total																			

Grand Total (in words):

Date :

Name & Signature
Of the Examiner

Name & Signature
Of the Chairman / Vice Chairman