



DELHI TECHNOLOGICAL UNIVERSITY

(Established by Govt. of Delhi Vide Act 6 of 2009)
(Formerly Delhi College of Engineering)

ShahbadDaulatpur, Bawana Road, Delhi-110042

Tel: +91-11-27296337, Fax: +91-11-2787 1023

Academic (UG) Section

F. No. 105(471)DTU/Acad-UG/Make-up/2023-24/19360-67 Dated:- 07/05/25

Notification

Sub: Make-up Examination for B.Tech students who could not appear in End-Term Even Semester Exam-May 2025

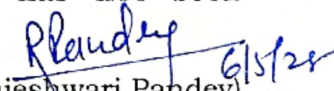
Pursuant to the clause R.1 (B).23 of the Academic Programmes Ordinance & Regulations 2024 relating to undergraduate programmes leading to Bachelor of Technology, if a student is absent during End-Term Examination Even Sem 2024-25 of a course due to medical reasons or other special circumstance, he / she may apply for the award of "I" grade to the HoD of the concerned Department offering the course, through the Course Coordinator. Student should submit following documents alongwith the application:

1. Formal application in prescribed format (attached) indicating date of absence of specific subjects and their codes in which they could not appear for End-Term Examination.
2. Original Medical Certificate.
3. Self attested copy of treatment records, prescriptions and medical tests undertaken.
4. Fitness certificate in original.
5. Relevant documents for other special circumstance.

The HoD may forward this request alongwith above mentioned documents to Dean Academic (UG). Make-up examination shall be normally held for End Term Examination to convert "I" grade to proper letter grade.

Therefore, the students who could not appear in End-Term Examination May 2025 due to medical reasons or other special circumstance may apply in prescribed format enclosed and submit to respective HoDs along with all required enclosures on or before **02/06/2025**.

Make-up-examination will be allowed only if a student has not been disqualified earlier, due to shortage of attendance.

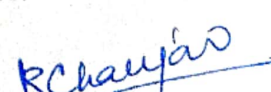

(Prof. Rajeshwari Pandey)
Dean Academic (UG)

Enclosure.: As Above

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Copy to:

1. PA to the V.C. for kind information to the Hon'ble Vice Chancellor.
2. Registrar, DTU.
3. All Dean's
4. All HoDs : With the request to bring to the knowledge of students and display on Notice Boards.
5. Controller of Examinations.
6. Head (CC): with the request to upload notification on DTU website.
7. Notice Boards.
8. Guard File.


(Prof. Rishu Chaujar)
Associate Dean Academic (UG)



**ACADEMIC SECTION (UG)
DELHI TECHNOLOGICAL UNIVERSITY**

FORM OF APPLICATION

for

**Make-up Examination for Mid / End Semester (Odd / Even)
Examination 202____ - 202_____**

The form when completed should be submitted to: Controller of Examination <i>Delhi Technological University</i>	(For use by the Academic Section {UG}) Permitted by Dean Acad.(UG) / NOT Permitted by Dean Acad.(UG)
To be filled in by the applicant	
Name:.....	Address for Communication:
Roll No:
Mobile No.....
Email:

A. Courses requested for Make-up Examination:

S. No.	Course Code	Name of the Course	Credits	Date & time slot of the Exams scheduled	Reason for missing the Exams
1					
2					
3					

**B. Supported Mandatory Documents for the claim:
(Please tick the annexed documents below)**

1	Recommendation of concerned Warden (<i>if the student resides in University Hostel</i>)
2	Medical Certificate issued by the Medical Officer of the Hospital the student was admitted duly endorsed by Medical Officer of University Health Centre
3	Proof of admission in Hospital and discharge slip etc
4	Proof of medical tests conducted
5	Fitness certificate of the hospital

6	Endorsement by parent/guardian on the certificate of treatment <i>(if the student is a Day Scholar)</i>
7	Medical certificate from hospital where Parents/real brother or sister/spouse was admitted in ICU duly endorsed by Medical Officer of University Health Centre
8	Prior Approval of Dean Academic (UG) for any authorized work in the academic interests

DECLARATION

I hereby solemnly declare that the foregoing facts are true and correct and nothing is false therein and nothing material has been concealed there from. I also agree that in case any information given by me herein before is found false at later date, the result for the requested courses for make-up examination be cancelled.

Signature of the Parents/Guardian

Name (in Capital Letters)

Date :

Place :

Signature of Student

Name (in Capital Letters)

Date :

Place :