

LIST OF DIFFERENTLY ABLED STUDENTS

Name of the School:

Name of the Department:

Name of the Course:

Month / Year of Passing:

Batch:

No. of Students / Strength:

Sl .No.	Name of the Candidate & Register Number (The spelling should be as per the qualifying records)	% CGPA Secured	Residence Address	Mobile No.	Email ID.	Student Photo	Aadhar No.	Remarks

Signature of HOD