

## ALIGARH MUSLIM UNIVERSITY, ALIGARH

Session: \_\_\_\_\_ Re-Sit Form for B.A.LL.B. **PHOTOGRAPH** 

(As in HS/SS Certificate)	70 40 40
2) Enrolment No.	(3) Faculty No. (4) Hall
Day Month	Year (6) Gender (M/F) (7) Semester
7)Address	00 T T 00
District	
Tel./Mobile No.	Email:
Paper Code	Title
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