

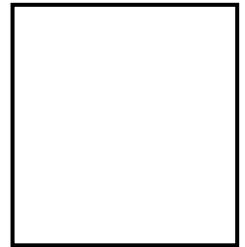


BETHESDA BIBLICAL INSTITUTE (Distance Theological School)

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PHONE No-0120-2890026, +91- 9971532857,+91-9313312326



(EXAMINATION ENTRY FORM)

NAME.....

FATHER'S/HUSBAND NAME.....

DATE OF BIRTH.....

NAME OF COURSE FOR EXAMINATION.....

ADMISSION NO.....YEAR OF ADMISSION.....

EXAMINATION FEES.....BY CASH/DD NO.....

EXAMINATION SESSION & YEAR OF EXAMINATION.....

SEMISTER NO OF EXAMINATION.....

SUBJECT'S/PAPER'S FOR EXAMINATION.....

1.....

2.....

3.....

4.....

5.....

6.....

SINGNATURE OF CANDIDATE.....

NAME OF CANDIDATE.....



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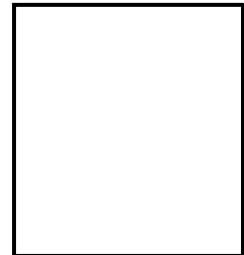
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SEMISTER NO OF EXAMINATION.....

ADDRESS OF EXAMINATION CENTER.....

(FILLED BY INSTITUTE)

SUBJECT'S/PAPER'S FOR EXAMINATION.....

1.....

2.....

3.....

5.....

6.....

SINGNATURE OF CANDIDATE.....

SIGNATURE & SEAL
DIRECTOR/ EXAM COORDINATOR