



BITM/ED-21: Unfair Means Reporting Form

Session : _____ MID END SS NC

1. Full Name of Candidate : _____
2. Roll No : _____
3. Program : _____
4. Branch : _____
5. Semester : _____
6. Venue of Examination Hall : _____
7. Hall No : _____
8. Date of Examination : _____
9. Time : _____
10. Course Code : _____
11. Course Title : _____
12. Name of Invigilator (s) : _____
13. **Details of seized materials:** (Attach with the form, If any) Chit, mobiles and any electronic gadgets confiscated shall be deposited to Examination Office along with the answer script.

14. **Statement of Candidate:**

Signature of Candidate (Compulsory) Date: Time:

15. **Statement of Invigilator (s):** Record circumstances of offences in brief (The statement should be definite and unambiguous.)

Certified that the statement by student was made in my/our presence.

Signature of Invigilator (s)