

ಅನುಬಂಧ - 2 (COVID-19 Pandemic)

Request for Change of Exam Centre in view of COVID-19 Pandemic
(ONLY FOR September 2020 THEORY EXAMS)

Sl.no	(To be Submitted to Parent Institution)	
1	Name of the Candidate:	
2	Register Number:	
3	Student AADHAR Number, Mobile Number, E-mail ID:	
4	Name of the Polytechnic Studying (Parent Institution) with Inst. Code:	
5	Name of the Father/Mother with Mobile Number:	
6	Permanent / Residential Address:	
7	Willing to take change of centre (Optional)	YES / NO
8	If willing to take change of centre mention Valid Reason/s:	
9	Write Name of any two Govt. Polytechnics of Karnataka opted for change of centre near to your Residence	1) 2)
10	Distance from your Permanent / Residential address to (1) your Parent Institution: (2) Opted Govt. Polytechnics of Karnataka as Exam Centre:	(1)..... (2)..... &

Note: 1. Change of Exam centre is optional on Request of the Candidate.

2. Change of centre is Permitted only if the Course/Programme exists in the opted Exam centre and students' capacity of opted Exam centre & also administrative feasibility.

3. Principal of the Parent Institution should address the issue, if candidate is willing and the same should be updated in BTELinx webportal.

Signature of the Parent:

Signature of the Candidate:

Date:

Date:

Place:

Place:

(For Office Use only)

This is to certify that the candidate.....
vide Reg.No..... request has been updated in BTELinx web portal for needful.

Handwritten signature and date: 28/09/2020