****University of Swat

**Centre for Plant Sciences and Biodiversity**

Program Name: (e.g) BS Botany

**Examination**

**Fall**

**Spring**

**Year**

**Session**

**2017**

**2017-21**

**Award List (for Courses without Lab. Work)**

**Fresh Repeat SCE Makeup IOG**

**Semester: I II III IV V VI VII VIII IX X**

Course Title: (e.g) English-I

Teacher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Hours: (e.g) 03 (3-0)

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| **Roll No.** | **Name of Student** | **Marks Obtained**  |
| **MT (30)** | **FT (50)** | **Assig. (05)** | **Pres. (10)** | **Quizzes(05)** | **Total 100** |
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\*MT: Mid Term, FT: Final Term, Assig: Assignments, Pres: Presentations

Name of Examiner/Prof: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature with date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Countersigned by HoD \_\_\_\_\_\_\_\_\_\_\_\_