

ಬೆಂಗಳೂರು
ನಗರ ವಿಶ್ವವಿದ್ಯಾನಿಲಯ



BENGALURU
CITY UNIVERSITY

Office of the Registrar (Evaluation), Central College Campus, Dr.AmbedkarVeedhi,
Bengaluru – 560 001. E-mail: registrarevlubcu@gmail.com, Ph.No.080-2229555

No: BCU/FAC/Rank/01/2020-21/1701

Date: 17-09-2021

FINAL RANK LIST

The 1st Annual Convocation FINAL RANK LIST of students to award the rank on the basis of the overall performance and total marks secured by the candidate in all semester of the course under CBCS scheme Examination who have secured marks in order of merit in **MASTER OF BUSINESS ADMINISTRATION** passed in first attempt Examinations held during **September / October 2020** are as follows:

Sl. No.	Reg. No.	Name of the candidate	Dept. / College	Total Marks obtained (Max. Marks 2700)	Percentage	Rank
1	MB180972	TEJASWINI D	Adarsh Institute of Management and Information Technology	2076	76.89	1
2	MB182448	SAMPREETHA R C	M.S. Ramaiah College of Arts, Science and Commerce	2074	76.81	2
3	MB181614	MALA BAI K	Maharani Arts Commerce and Management College for Women	2050	75.93	3
4	MB180044	SAKSHI SHYAM NANWANI	International Institute of Business Studies	2047	75.81	4
5	MB180863	JOVITA EPHREM M	Adarsh Institute of Management and Information Technology	2046	75.78	5
6	MB188293	SHASHIDHAR S C	GIBS B School	2046	75.78	5

REGISTRAR (Evaluation)
Registrar (Evaluation)

Bengaluru City University
Central College Campus
Bengaluru - 560 001

To

1. The Co-Ordinator, Canara Bank School of Management Studies, Central College Campus, Bengaluru City University, Bengaluru.
2. The Principals of all concerned Colleges affiliated to Bengaluru City University, Bengaluru.

Serial No.

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Application for the issue of RANK CERTIFICATE			For Office Use only	
		
			<i>C.W</i>	<i>Suptd</i> <i>A.R.</i>
1. Name (IN BLOCK LETTERS) (As Registered for University Exams)				
2. Residential / Postal Address with Phone Number			
3. Name of the College / Department				
4. a. Name of the Examination / Course / Branch				
b. Details of Reg. No(s) with year & Month of Passing				
Sl.	Register Number	I/II/III Year/Semester	Month & Year Exam	Subject/Paper Passed
1.				
2.				
3.				
4.				
5.				
6.				
5. Indicate the Documents Required				
6. Reason (s) for application for the above document(s)				
7. Indicate the Change of Branch of College, if any, Enclose the copy of permission letter from the Registrar, BCU.			8. Details of Fee paid : Amount.....(Rupees.....only) Challan No..... & Date..... D.D.No..... & Date..... Name of the Bank Place	
9. Any other information				

I hereby declare that the information furnished above are true and correct to best of my belief.

Place :

Date :

Signature of the Applicant

CERTIFICATE

1. Certified that the information furnished above are correct as per the records of the College.
2. Certified that the candidate had not rejected his / her results of any year/semester and not involved in any examination Mal-practice. Recommended for the issue of the document(s) applied.

Place:

Date:

Signature of the Chairperson/
Chairman/ Director/ Coordinator/ Principal