

**End Semester Examinations (Theory)**
  
**Duty Adjustment Form for Hall Superintendent**

**Name of the Faculty Member** :  
**Designation / Department** :  
**College Name (if external)** :  
**Reason** :

Date & Session	Name of the Faculty Member (Substitute)	Signature of the Substitute*

\*A faculty shall not act as a hall superintendent if examination of the course currently handled by him/her is held on that date.

Date:

Signature of the Faculty

Principal

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