



Course	B.B.A.-YEAR-1-SEM-1 [U.G. Semester (Regular) Odd]	Roll Number	
Subject(s)	BUSINESS ADMINISTRATION (IB)	Enrollment No.	
College Name	[001MS] LUCKNOW UNIVERSITY, LUCKNOW (IMS BUILDING, NEW CAMPUS, JANKIPURAM)		
Candidate's Name	UTKARSH SRIVASTAVA		 Affix your recent passport sized photo here
Father / Mother Name	VINOD KUMAR SRIVASTAVA / CHARU SRIVASTAVA		
Religion	Hindu		
Category / Sub-Category	General (Unreserved) / Not Applicable		
Gender / BirthDate	Male born 30-Oct-1999		
Identification Proof	Driving License : UP3220180027503		
Telephone	8318501256		
Email	utkarshsri3010@gmail.com		
Present Address	67 VIJAY NAGAR,,KANPUR ROAD,,LUCKNOW.		
Permanent Address	67 VIJAY NAGAR,,KANPUR ROAD,,LUCKNOW.		

### Qualifying Examination Details

Class	Board	Roll No.	Year	Marks Obt.	Max Marks
High School	ICSE	6024373	2015	636	700
Intermediate	ISC	6024373	2017	456	500

### Subjects / Papers Details

BUSINESS ADMINISTRATION (IB)	PAPER-1 : 1609 BUSINESS ECONOMICS
BUSINESS ADMINISTRATION (IB)	PAPER-2 : 1611 FINANCIAL ACCOUNTING
BUSINESS ADMINISTRATION (IB)	PAPER-3 : 1610 ESSENTIAL OF MANAGEMENT
BUSINESS ADMINISTRATION (IB)	PAPER-4 : 1612 BUSINESS COMMUNICATION
BUSINESS ADMINISTRATION (IB)	PAPER-5 : 1608 BUSINESS MATHEMATICS
BUSINESS ADMINISTRATION (IB)	PAPER-6 : 1607 FOREIGN TRADE OF INDIA

### Declaration by the Candidate

I, UTKARSH SRIVASTAVA on 10-Sep-2019 09:27 solemnly declare that all the information provided in the form no. 0087195 is true to the best of my knowledge and belief. If any information herewith is found to be untrue / false / incorrect, my candidature / admission / examination is liable to be cancelled and no claim of its fee refund would be raised by me. If in future, any of this information is found untrue / false / incorrect, the University may cancel my degree.

(Signature of the Candidate)

अभ्यर्थी का नाम (हिंदी में)

### Certificate by the Dean / HOD / Principal

[001MS] LUCKNOW UNIVERSITY, LUCKNOW (IMS BUILDING, NEW CAMPUS, JANKIPURAM)

Certified that Shri/Km./Smt. UTKARSH SRIVASTAVA is a bonafied student of the college / university. All the documents of qualifying examinations mentioned in form no. 0087195 have been duly checked, verified and found correct. Thereby it is certified that he/she is eligible for the applied examination as per university rules and his/her examination form is being forwarded.

Date:

Signature of Checker

Dean / HOD / Principal  
(Signature with Seal/Stamp)