

**LAKIREDDY BALI REDDY COLLEGE OF ENGINEERING (AUTONOMOUS)**

L.B. Reddy Nagar :: Mylavaram-521 230 :: Krishna Dist. :: A.P  
Approved by AICTE, New Delhi. Affiliated to JNTUK, Kakinada  
**EXAMINATION SECTION**

Date: 31-07-2021

**EXAMINATION NOTIFICATION****August -2021****MCA (II Semester) (R14) Suppl. Examinations, August 2021  
(Applicable for 2015 & 2016 Admitted batches only)****MCA (IV Semester) (R14) Suppl. Examinations, August 2021  
(Applicable for 2015 & 2016 Admitted batches only)**

Candidates appearing are informed to apply for the above examinations as per the schedule given below:

| EXAM REGISTRATION          | START DATE | END DATE   |
|----------------------------|------------|------------|
| Without late fee           | 02-08-2021 | 14-08-2021 |
| With late fee of Rs. 500/- | 15-08-2021 | 16-08-2021 |

**SUPPLEMENTARY EXAMINATION FEE**

|                                                              |            |
|--------------------------------------------------------------|------------|
| For ONE Subject in a semester (Theory/Practical)             | Rs. 300/-  |
| For TWO Subjects in a semester (Theory/Practical)            | Rs. 600/-  |
| For THREE Subjects in a semester (Theory/Practical)          | Rs. 900/-  |
| For FOUR and above Subjects in a semester (Theory/Practical) | Rs. 1200/- |

**NOTE :**

- Payment of examination fee does not guarantee eligibility for appearing the examinations.
- The eligibility of student depends on fulfillment of the academic requirements as per the regulations.
- Examination fee should be paid through ONLINE payment only.  
Payment through NEFT/RTGS/UPI (GPay/Phone Pe etc.)  
(Using Bank Account Details)

|                  |                       |
|------------------|-----------------------|
| A/c Holder Name  | Principal, LBRCE (ES) |
| Type the Account | Current               |
| Account Number   | 3172832066            |
| Bank Name        | Central Bank of India |
| Branch Name      | LBRCE, Mylavaram      |
| IFSC Code        | CBIN0283964           |

- **The Scanned copies of filled in application must be sent to the mail: [lbrceexamfee@gmail.com](mailto:lbrceexamfee@gmail.com)**

**CONTROLLER OF EXAMINATIONS****PRINCIPAL**

Copy to : 1. HoD,  
2. Librarian,  
3. Attendance section  
4. Notice Boards



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**OFFICE OF THE CONTROLLER OF EXAMINATIONS**

**Application for Registration of Semester End Examination**

**(a) Student Details :**

Regd. No.

- (i) Name of the Student :  
(In BLOCK Letters)
- (ii) Programme : B.Tech / M.Tech. / MBA / MCA
- (iii) Branch :
- (iv) Semester :
- (v) Regular / Supplementary :
- (vi) Regulations :
- (vii) Month and Year of Examination :
- (viii) Mobile Number :

**(b) Online payment details :**

| Amount Paid (Rs.) | Date of Payment | Transaction ID / UTR Number |
|-------------------|-----------------|-----------------------------|
|                   |                 |                             |

**(c) Details of Subjects Registered :**

| S. No.                      | Subject Code | (i) Name of the theory subject |
|-----------------------------|--------------|--------------------------------|
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
| (ii) Name of the Laboratory |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |
|                             |              |                                |

Station :

Total Subjects

Date :

**Signature of the Student**