



Maharani Kasiswari College

C.U EXAMINATION FEES PAYMENT

Candidate Details

Full Name of Candidate

Sonal Shaw

University Roll Number

232213-11-0218

University Registration Number

213-1211-0212-23

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3rd Semester

Select Exam Type

Regular Exam Fees

Additional Details

Mobile Number

+919163094569

Email Address

sejalshaw02@gmail.com

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