

**List of Examiners for Term End Practical Examination (MCA/BCA/CIT Programme) TEP January / July
20.....**

SC Code _____

S. No.	Name of the examiners	Qualification	Whether approved counsellor for IGNOU	Address with contact no.

Date: _____

Signature & Name of the PIC/Coordinator _____

SC Code _____ Stamp of the PIC/Coordinator