



# UNIVERSITY OF DELHI

## STATEMENT OF MARKS

Certificate No 0340

Name of Candidate... *Shailender Singh % Dhara Singh*...

Roll No. *172*

Examination LL.M. (Three Year Course) *I* Term: .....

Year... *2010*  
(Annual/Supplementary)

Subject	I	II	III	IV	V	VI	VII	VIII	IX	X	I	II	III	IV	V	VI	Distt.	REMARKS
	100	100	100	100	100	100	100	100	100	100	Term	Term	Term	Term	Term	Term		
	<i>50</i>							<i>54</i>										<i>104/200</i> <i>Passed</i>
Subject	I	II	III	IV	V	VI	Clinical	Practical	Oral									

20 MAR 2011

Dated.....19

Prepared by <i>[Signature]</i>	Checked by <i>[Signature]</i>
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*[Signature]*  
Controller of Examinations  
Section Officer