

Camellia School of Engineering & Technology

Continuous Assessment No.- 1 / 2 / 3 / 4

Session: 20 - 20

Full Marks: 25

Name of the Student*:.....

*(*In capital letters only)*

University Roll No.

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Department..... **Course**.....

Semester..... **Subject Code**.....

Name of the Subject.....

(Only 8 nos. of sheets are allotted to write answers; no more sheet will be provided)

