

**Application for Re-evaluation  
(School Copy)**

Program  Batch  Semester

Name of Student

Examination  University Enrollment No.

Mobile No.  E-mail ID

SUBJECTS FOR WHICH RE-CHECKING IS REQUESTED				
S No.	Course Code	Course Title	ESE	
			Marks (60)	Grade
1				
2				
3				
4				
5				
6				
7				

1. An amount of Rs \_\_\_\_\_ towards Re-evaluation Fee for \_\_\_\_\_ papers @ 900/- per Course has been deposited vide Fee receipt no. \_\_\_\_\_ dated \_\_\_\_\_ and copy of the Fee receipt is enclosed herewith.
2. Please attach a copy of online published Result of yours/attach a copy of your issued Grade Card with this application form.

Date \_\_\_\_\_

Signature of the Student \_\_\_\_\_

Signature of the HoI/Dean \_\_\_\_\_

**Application for Re-evaluation  
(Examination Department Copy)**

Program  Batch  Semester

Name of Student

Examination  University Enrollment No.

Mobile No.  E-mail ID

SUBJECTS FOR WHICH RE-CHECKING IS REQUESTED						
S No.	Course Code	Course Title	Previous		Revised	
			Marks (60)	Grade	Marks (60)	Grade
1						
2						
3						
4						
5						
6						
7						

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Signature of the Student \_\_\_\_\_

Signature of the HoI/Dean \_\_\_\_\_

Controller of Examinations \_\_\_\_\_