

**APPLICATION FOR RE-EVALUATION**

Date: \_\_\_\_\_

Form No. : \_\_\_\_\_

**CANDIDATES SHOULD CAREFULLY GO THROUGH THE RULES PRINTED OVERLEAF BEFORE FILLING IN THIS FORM.**

This application is to be filled in and signed by the candidate only.

1. Name of Candidate (Block letters) .....

2. Father's / Guardian's Name .....

3. Roll No ..... 4. Admission No ..... 5. Programme .....

6. Semester .....

7. Date of Declaration of result .....

8. Mobile No.: Student  / Guardian

9. Email id of student: University Email id  Personal Email id

**REGULAR**

S. No.	Paper Code	Paper Title	Date of Examination	Marks Obtained

(Maximum of three theory papers in a semester)

**DUE PAPERS**

S. No.	Paper Code	Paper Title	Date of Examination	Marks Obtained

**DECLARATION**

*I have carefully read the rules regarding re-evaluation printed overleaf and I agree to be governed by the same. I am fully aware that as a result of seeking re-evaluation, the original marks secured by me can also be reduced. I undertake to surrender my original result and to accept the final result when declared by the University as a result of re-evaluation applied for by me, as per the rules.*

\_\_\_\_\_

**(Name & Signature of the Parent/ Guardian)**

\_\_\_\_\_

**(Name & Signature of the Candidate)**

- \*Note: 1. Signature of the candidate must correspond to that on Examination form filled in by him/her.  
2. Application form will be accepted provisionally subject to verification of details  
3. Incomplete application will be rejected summarily.

