Application Form for Verification of Examination Marks/ Grades

Faculty of   University of

1. Details of the candidate

Name of Candidate		
Registration No.		Index No.	
Year	Semester	

2. Assessment (s) to be verified

End- semester / Year- end Examination/ Final Examination	Course / Subject	Marks Received	Grade Received

Total amount paid: Rs…………………………. (at the rate of Rs.500/- per Course/ Subject/Examination):
(Original receipt should be attached)

Date:- ……………………………….   Signature of the Candidate:- ………………………………………

FOR OFFICE USE
Results after Verification

End- semester / Year- end Examination/ Final Examination	Course / Subject	Marks Received	Grade Received	Changed/ Not changed

Name and Signature of Verification Board Member: Date of Verification: ……………………

Name	Designation	Signature

Note: In the case of final examination relevant minutes of the Special Result Board and the Senate must be attached.