



Application Form for Verification of Examination Marks & Grades

1. Details of the Candidate

Student No.	Telepho	one No
Name with Initial	Email	
Academic Year	Semest	er

2. Assessment(s) to be verified

End – semester / Year – end Examination / Final Examination	Course / Subject	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:
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FOR OFFICE USE:

Results after Verification

End – semester / Year – end Examination / Final Examination	Course / Subject	Marks Received	Grade Received	Changed/ Not Changed	Remarks

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