

**APPLICATION FORM FOR RETOTALLING/REVALUATION / XEROX  
COPIES OF ANSWERSCRIPTS**

1. Name .....
2. Reg. No.....
3. Programme .....
4. Semester .....
5. Revaluation/Retotaling/Xerox copy: (tick whichever is applicable)

Sl. No	Subject	Course code	Maximum Marks	Marks Obtained

6. Paid Rs..... Vide Reciept No.....dated for .....Retotaling/  
Revaluation/Xerox copy of answer scripts
7. I ..... declare that the information furnished above is true.

Place:

Date:

Signature of the student

1. Certified that the student belongs to.....semester, year.....

2. The original marks sheet has been verified and the applicant fulfills all conditions.

Date:

Principal