

Application Form for Verification of Examination Marks & Grades

Faculty of

University of.....

Dept of

1. Details of the Candidate

Name of the Candidate			
Registration No.		Index No.	
Year		Semester	

TP NO:

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