

Form for Re-Evaluation of Answer Script(s) of END-SEMESTER EXAMINATIONS

Name of the Student :

Enrolment No. :

Semester :

Department :

School :

Course(s) in which re-evaluation is sought:

Sl. No.	Course Code	Course Title	Original Marks Awarded	Marks Secured in Re-evaluation	Variation	Remark(s) by CoE office

Undertaking: I..... S/o or D/o hereby undertake that I am surrendering the original marks awarded to me in the course(s) aforementioned and shall accept the decision of office of the Controller of Examinations (CoE) regarding re-evaluation.

Date:

Signature of the Student

OFFICE USE

Forwarded by:

1. Date: Signature of Head of Department:

After Re-evaluation:

1. Date: Signature of Re-evaluating Faculty

Remark(s) and Signature by the Office of Controller of Examination:

1. Re-evaluated marks are final
2. Forwarded to Final Examiner by appointed by Vice-Chancellor

Controller of Examinations (CoE)