Application From for Verification of Examination Marks & Grades

 University of Vocational Technology

Faculty of ……………………………………………………………………………………………………………………………………

Details of the Candidate

|  |  |
| --- | --- |
| Name of the Candidate |  |
| Registration No. |  | Index No |  |
| Year | Semester |  |
| Mobile No:  |  Email:  |

Assessment (S)to be Verified.

|  |  |  |
| --- | --- | --- |
| Examination | Module Name | Grade Received |
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|  |  |  |
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|  |  |  |
|  |  |  |

Total amount paid: Rs…………………………………… (at the rate of Rs.500/= per Module)

(Original receipt should be attached)

Date ……………………………… Signature of the Candidate ……………………………………………

For Office Use:

Date on which the application was received :………………………………………………..

Results after Verification

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Examination | Module | Marks Received | Marks after verification | Grade Received | Grade after verification | Changed/Not Changed |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Name and signature of verification Board Members:

Date of Verification ……………………………………

|  |  |  |
| --- | --- | --- |
| Name | Designation | Signature |
|  |  |  |
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