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		

Assessment (S)to be Verified

Examination	Module	Grade Received

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