

UNIVERSITY OF CALICUT

APPLICATION FOR REVALUATION / SCRUTINY / PHOTOCOPY OF ANSWERPAPERS

Name of Examination	:					
Centre of Examination	:					
Name of the Candidate	:					
Register Number	:					
Month and year of Exam	:					
Address for Communication	:					
(in capital letters, with PIN)						
Mobile Number	:					
Details of Papers for Reval	uation/Scrutiny/Pho	otocopy				
Name of paper/course		Revaluation (tick, if applicable)	Photocopy Scrutiny (tick, if applicable)			
Details of fee remitted						
Chalan Number Amount		Da	Date P		ace of remittance	
Place :			S	ignature	of the Applicant	

1. Fee Rates

(a) Revaluation Rs 600 per paper, (b) Photocopy Rs 150 (c) Scrutiny (recounting) Rs 50

In the case of medical and paramedical courses, fee for revaluation is <u>per section</u>. If there are more than one section in the question paper, fee @ Rs 600 is to be paid for each section.

An amount of Rs 25 additionally is to be remitted, as cost of application form.

2. Head of Account

8443-00-106 PD A/c of Calicut University (Malappuram Dist) 8658-00-102-96(02) CUS (All Other Districts)

FOR OFFICE USE ONLY

False number on the answerscript	Original Mai	rks/SGPA	No 0	Name & Address of Chief Examiner	
	As entered in the TR (before effecting moderation)	As entered in examiners mark book	Address of the additional examiner		
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	Certified that the	entries are	made in	conformity	with the	entries i	n the	TR and	examiners	mark.
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Tabulation Section Number $$\operatorname{Asst.}$$ S.O . $$\operatorname{AR}/\operatorname{DR}$$