



**Re-Checking/Reassessment Form**

To be filled in by the student requesting for Re-checking / Re- assessment in semester End Examination.

**N. B.**

1. Forms submitted after the due date will not be accepted.
2. Please fill in all details neatly in capital letters.
3. Incomplete form is liable to be rejected.

APPLICATION FOR

RECHECKING

REASSESSMENT

To  
The Controller of Examination,  
Vidhyadeep University,  
Anita (Kim) – 394110

Respected Sir,

I hereby apply for Re-checking / Re- assessment of my answer – book/s in the following Subject/s paper as I am not satisfied with the marks obtained by me in the said subject/s paper/s. I have read the Re-assessment rules and I shall abide by them. The necessary particulars are given below:

Full Name: \_\_\_\_\_

(As per mark sheet of last exam passed)

Address for Correspondence:

Pin Code :

Phone No. : \_\_\_\_\_

Mobile No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name of Examination & Year \_\_\_\_\_

Name of the course: \_\_\_\_\_ Semester: \_\_\_\_\_

Exam Seat No: \_\_\_\_\_ Date of Declaration of Results \_\_\_\_\_

Details of subject/s and paper /s in which Re- assessment of Answer book/s is required and mark Obtained (Attach an attested copy of mark sheet)

Sr. No	Subject Code	Subject Name	Grade/marks Obtained

Total Amount Paid ₹ \_\_\_\_\_ University Receipt No. \_\_\_\_\_ and Date \_\_\_\_\_  
(₹250/- per subject for Rechecking, ₹1000/- per subject for Reassessment)

Signature of Applicant

Sign of Exam Dept.