

CLUSTER UNIVERSITY OF JAMMU

APPLICATION FORM FOR RE-EVALUATION OF ANSWER SCRIPT OF SEMESTER _____ BA/B.Sc./B.Com/BCA/BBA/B.Sc.(Honors/Integrated)/PG COURSE _____ Examinations

NOTE: BEFORE FILLING THIS FORM PLEASE GO THROUGH THE SALIENT FEATURES OF THE STATUTES GOVERNING RE-EVALUATION VERY CAREFULLY.

- Name of the applicantSon/Daughter of
(In Block Letters) Sex: Male/Female/Other
- Roll No. (Semester)
- Address for correspondence
..... Mobile No.
- Name of the Examinations
- Result (Fail/Re-appear/Pass)
- Particular Subject(s), Paper(s) option in which Re-evaluation of answer script(s) is desired (fill it carefully) giving name(s) of paper(s) option(s):

Name of Subject	Paper Code	Marks in Theory
I		
II		
III		

- Detail of fee deposited: Amount of Rs. Bank Draft No. dated payable in favour of Registrar, Cluster University of Jammu.
- Specimen of Handwriting

DECLARATION

I Son/Daughter of hereby declare that I have read the Statutes governing Re-evaluation of answer scripts.

Date:

Signature of the applicant

CERTIFICATE

Certified that the candidate has affixed his/her signatures in my presence.

Date:

(Signature of the Principal/Head of the Deptt./
Gazetted Officer with the Official Stamp)

- Note: (i) Candidate should attach **PHOTO COPY OF CONCERNED MARKS CERTIFICATE** with the Re-evaluation Form.
(ii) Incomplete form will not be accepted.

To be filled by the candidate

Name of the candidate Son/Daughter of
Class Roll No. Session DD No.

(The candidate must have insist to take back the receipt on depositing the form)

Signature of the Receipt Clerk

Re-evaluation fee Rs.670/- per answer script, late fee Rs.370/- per answer script after due date for another count of 5 days after expiry of the prescribed period of 15 days.
Late fee of Rs.770/- for late entertainment of application form for re-evaluation for another count of 3 days after expiry of 5 days with late fee.