



**Application for Verification
 (Under 0-237)**

No.

at of Month Year Seat No.

For Office use only
 Receipt No.
 Date

Name and Address of Candidate (in BLOCK LETTERS)

Shri/Smt./Kum. _____

Address : _____

Name and Address of the College/Department/Institute

PARTICULARS OF SUBJECT(S) APPLIED FOR VERIFICATION. Just fill in the column(s) numbered by Roman numerals only.

Nomenclature of Subject/Paper/Practical									Paper No. & Code No.			Date & Time of Examination			Marks Obtained		
I	2	3	4	5	6	7	8	9	10	11	12	13	14	Total	Grace Marks given, if any	Max. Sub. Grace	Signature of the Clerk

Number of Subject(s)/Paper(s) in which verification is sought : Fees paid Rs. _____ by Cash/D.D./I.P.O.

Place :

Date :

Signature of the Candidate

[P.T.O.]

***O.237** : Informations as to whether a candidate's answer in any particular head or heads of University Examination have been examined and marks will be supplied to the candidates on his submitting **within two weeks of the declaration of the said examination results**. An application accompanied by a fee of **Rs. 50/- each paper**. The fee is only for verifying whether a candidate's answer in any particular head have been examined; and not for the re-examination of answers. The rule that marks obtained by candidate in individual questions or in section(s) of paper cannot, in any circumstances, be supplied holds good also in the case of applications for the verification of marks.

N.B. : The result of the application will be communicated to the candidate at his/her college address. No personal inquiries in this connection will be entertained.

Please attach a Xerox Copy of the Statement of Marks and relevant question paper/s.

DETAILS REGARDING APPLICANT'S RESULT AT THE LOWER EXAMINATION CONDUCTED BY THE UNIVERSITY/COLLEGE

Name of the Examination :

Month & Year :

Seat No. :

Result :

(Whether passed/failed or held in Reserve)

Signature of the Candidate

Signature of the Principal,

Class : _____ Div. : _____

Year : _____

College Stamp

APPLICANTS MUST FILL IN THE FOLLOWING CARDS SEPARATELY FOR EACH SUBJECT/PAPER APPLIED FOR VERIFICATION

This Card should be kept at the place of the answer-book at the stack	Seat No. _____ Exam. _____ Centre _____ Subject/Paper _____ Paper No. _____ Date and time of Examination _____ Signature of Candidate _____ Received _____ Signature of Clerk : _____ Date : _____
This Card should be kept at the place of the answer-book at the stack	Seat No. _____ Exam. _____ Centre _____ Subject/Paper _____ Paper No. _____ Date and time of Examination _____ Signature of Candidate _____ Received _____ Signature of Clerk : _____ Date : _____
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