SRI VENKATESHWARA UNIVERSITY
PAKYONG, SIKKIM, INDIA

(Established by the Government of Sikkim & Recognised by the UGC under Section 2(f) of the UGC Act,1956.)

EXAMINATION REVALUATION APPLICATION FORM

(For Semester-End Examinations)

Name: _____

Enrollment No: _____

Programme: _____

Semester: _____ Session: _____ Mobile: _____

Email: _____ DOB: _____

Courses Applied for Revaluation

Subject Code	Subject Name	Regular/Reappear

Fee Details

Total Exam fee Paid..... Receipt / Transaction No.....

Date: .....

Declaration

I hereby declare that the information provided above is true and correct to the best of my knowledge. I have fulfilled the attendance requirements and agree to abide by all rules and regulations of the University regarding examinations.

Student Signature: _____ Date: _____

Exam Branch (Office Use)

Checked & Approved: _____ Date: _____