



Dr. B.R AMBEDKAR UNIVERSITY- SRIKAKULAM

Application for Revaluation/Script Verification of UG/PG/B.Ed Courses

Name of the Candidate: _____

Name of the Exam : _____ Register Number :

Semester/Year-end : _____ Month & Year Appeared: _____

Course : _____

Sl. No	Subject Code	Title of the paper(s) in which Revaluation sought	Grade obtained
1.			
2.			
3.			
4.			
5.			

(Where the candidate studied)

Address for Communication: _____

Particulars of Enclosers: _____

Name of the Bank: _____

D.D.No: _____

Amount Rs. _____

Date of Payment: _____

(D.D should be drawn in favour of Registrar, Dr. B.R Ambedkar University, Srikakulam)

Station: _____

Date: _____

Signature of the Applicant

Forwarded
Principal
College Seal.

Instruction to Candidates:

1. Specimen hand writing should be enclosed.
2. Self Addressed cover (Stamped) should be enclosed.
3. The Candidate has to write his/her particulars such as Name, Register Number and course of study on the reverse side of the Demand Draft without fail.
4. Revaluation fee is **Rs.500/-** per each paper
5. Candidate Internet Result Copy Should be Enclose.