



UNIVERSITY OF KASHMIR, SRINAGAR.

Application form for Serutiny of Marks & Rechecking of Result

Serial No.

1. Examination
 2. Session
 3. Name of the Candidate
 4. S/o / D/o.....
 5. Address.....
 6. Telephone No. Mobile No.....
 7. Registration No. Roll No.....
 8. Paper/s or Subject/s to be serutinized & rechecked
 1)..... 2)..... 3).....
 9. Fee paid vide university Receipt No..... Dated.....
- For Rs.

Signature of the Candidate

Name.....

Forwarded to the Controller of Examinations, University of Kashmir, Srinagar for favour of necessary action. I have satisfied myself that the applicant has paid the prescribed fee & has submitted this application form within the prescribed time limit.

Signature of Gazzetted officer
(With designation Stamp)

Report of the Transit Section

After scrutiny of marks & re-checking of result it has been found that.....

DA

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SO

AC (Transit)

STATUTE

1. Any Candidate who has appeared at any examination conducted by the University may apply to the controller of Examinations for the scrutiny of his/ her marks and the re-checking of his /her result. Such application must be made in a prescribed form so as to reach the controller of Examination within 30 days from the date of the depet Declaration of result and must be forwarded by the Principal /Head of the Department concerned or other competent authority who forwarded the candidate's original application to appear at the examination.
2. No application form will be entertained after the due date.
- 3 All such applications must be accompanied by fee Rs.55/- plus Rs. 15/- per subject / course for each paper/ subject in which re-checking is sought.

Deposit Additional Rs. 5/- as Cost of Form along with Prescribed Fee



Jammu and Kashmir Bank Limited

Bank Copy

Pay-in-slip for University of Kashmir, Hazratbal, Srinagar.

Dated:	No:
Name:	Parentage:
Address:	Contact No:
Account no : 0007-0405-0000-1004	Rs.
Sign. Of Depositor Signature	Bank Seal &



The Jammu and Kashmir Bank Limited

University Copy

Pay-in-slip for University of Kashmir, Hazratbal, Srinagar.

Dated:	No:
Name:	Parentage:
Address:	Contact No:
Account No: 0007-0405-0000-1004	Rs.
Sign. Of Depositor Signature	Bank Seal &



The Jammu and Kashmir Bank Limited

Depositor's Copy

Pay-in-slip for University of Kashmir, Hazratbal, Srinagar.

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Name:	Parentage:
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