**UNIVERSITY OF ENGINEERING AND TECHNOLOGY TAXILA**

**APPLICATION FORM FOR RE-CHECKING OF ANSWER SCRIPTS**

**1. Name of the Applicant :**-------------------------------------------------------------

**2. Father’s Name :**------------------------------------------------ **3. Registration No.**------------------------------

**4. Section :**----------------------- **Semester :**------------------------(Spring/Fall/Summer) Year---------

**5. Contact No**.---------------------------------6. E-mail -------------------------------

**7.**  **PAPER(S) TO BE RE-CHECKED:**

i.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Teacher (s) Name**.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ii.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Teacher (s) Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

iii.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Teacher (s) Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**8. Fee Paid: (Rs)** ------------------ **Bank Challan No**.----------------- **Dated**--------------

I have read the instructions given overleaf and undertake to abide the rules and regulations of the University of Engineering and Technology Taxila.

**Dated:**---------------------------------------- **Signatures of the Applicant --------------------------------------**

**RECHECKING OF ANSWER BOOK**

**Name of the Applicant:** ---------------------------------**Registration No.**----------------------------------

**Sr. No. of Answer Book**------------------- **Department:** ------------------ **Semester :**( Spring/Fall/Summer)

**Teacher (s) Name** ------------------------- ---------------------------- ------------------------

**Was the application submitted in time? Yes/No** --------------------------------------

***RECHECKING MAY BE ALLOWED/NOT ALLOWED***---------------------------------------------

Dated:----------------- **Deputy Controller (Exams) -------------------------------------------**

**FINDING/COMMENTS OF THE CONTROLLER OF EXAMINATIONS**

--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------- Case be Filed/Proceed further for rectification of error------------------------------------

**Controller of Examinations Dated:**----------------------

**COMMENTS OF THE CONCERNED TEACHER(S)**

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Signatures of the Teacher

**ORDERS OF THE CONTROLLER OF EXAMINATIONS**

**------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------**

**Sign of Controller of Examinations**

**INSTRUCTIONS**

1. Fill the Re-checking Form completely
2. Attested photo Copy of Detailed Marks Certificate must be attached
3. Deposit re-checking Fee amounting to Rs500/- per paper and submit its original with this form.
4. Mention clearly the subject(s)/paper(s) required to be re-checked
5. An application form shall be entertained only if it is complete in all respects and received in the office of the Controller of Examinations along with the prescribed fee within fifteen (15) days of declaration of the result. The Dean of the Faculty concerned may condone the delay up to a maximum period of ten (10) days on payment of double fee.
6. Incomplete and incorrect form shall be returned to the candidate for completion and if it is not res-submitted within the prescribed time limit, no action shall be taken on it.
7. Time barred application shall not be entertained.
8. **IMPORTANT NOTE**
9. The answer book of a candidate in any Examination shall not be re- assessed under any circumstances.
10. Whereas the re-checking does not mean re-assessment or re-evaluation of the answer book. The Controller of Examinations shall see and certify that:
	1. The script has not been changed
	2. No portion of the Script has been left unmarked
	3. The marks awarded in the script have been correctly brought out on its cover
	4. The grand total on the cover of the script is correct
	5. The grand total on the cover of the script is correctly transferred to the award list.
	6. The result has been correctly posted and notified
11. The candidate has no right to see or examine the answer books for any purpose
12. The marks of a candidate could even decrease in light of Para (b) above. In the event of change of marks, the record shall be corrected accordingly and revised Semester Grade Sheet will be issued.