



S.P.MANDALI'S
RAMNARAIN RUIA AUTONOMOUS COLLEGE

APPLICATION FOR PHOTO COPY & REVALUATION
BA / B.Sc. / B.M.M. BIOANALYTICAL SCIENCE /
BVOC: GHM / TTM / PAS

CLASS _____ Division _____ Examination Seat No. _____ SEMESTER _____

Full Name of the Candidate (in BLOCK LETTERS SURNAME FIRST)

Tel. No. _____ Mob. No. _____ E-Mail _____

PARTICULARS OF SUBJECT APPLIED FOR REVALUATION / PHOTO COPY

SUBJECT PAPER CODE	SUBJECT PAPER TITLE	DATE OF EXAM.	MARKS OBTAINED EXTERNAL	OUT OF

UNDERTAKING

I hereby undertake that the results of the revaluation and photocopy of my answer-book/s shall be binding on me and that I shall accept the revised marks assigned to my paper.

Signature of the Applicant

Date: ____ / ____ / ____.