QUAID-I-AZAM UNIVERSITY, ISLAMABAD

APPLICATION FORM FOR RECHECKING OF ANSWER BOOK(S)

(Office of the Controller of Examinations)

Form No. _____
(*For office use only*)

1) Examination: …… Annual/Supplementary, 20…… Roll Number: ……..

2) Registration No.: | | | | | | | | | | | | |

3) Name of Candidate:
(IN BLOCK LETTERS)

4) Father's Name:
(IN BLOCK LETTERS)

5) Date of Result Declaration: | | | - | | | - | | | | |

6) Mention Subject(s)/Paper(s): i …… ii ……
(For which rechecking applied)
iii ……... iv ……
v ……... vi ……
vii ……... viii ……...

7) Name of the College: ……

8) Fee Deposited:
Amount: ……..…….. Bank Challan No.: …… Date: ……
Bank Branch: ……..……

9a) Postal/Residential Address: ……
……

9b) Contact Nos.: (Cell) | | | | | | | | | | | | (Home) | | | | | | | | | | | |

10) Regulations/Instructions:

i. Fill the application form yourself in your own handwriting. The form must be attested and forwarded through the College Principal.
ii. Rechecking doesn't mean re-assessment or re-evaluation of the answer book.
iii. The application form must reach to the office of the Controller of Examinations (ICT Annual Examination Section) within 20 days from the date of result declaration.
iv. Rechecking fee Rs.1000/- per paper.
v. Amount should be deposited in a campus bank branch of Quaid-i-Azam University or in the form of pay order in favour of the Treasure, QAU.
vi. Following documents must be attached with the form:
   a. Photocopy of result card.
   b. Original bank receipt/pay order of the fee.
vii. I have read and understood the entire contents of the "Regulations/Instructions".

Date: …… Candidate's Signature: ……

11) Remarks of the Principal:
_____
_____

Official Stamp

Name & Principal's Signature: ……

Dated: | | | - | | | - | 2 | 0 | | |
D D M M Y Y Y Y

(Rechecking Form Receipt)

Rechecking Form No: _____

Roll#:_____ Registration#_____ Examination: Annual/Supply

Name: _____ S/D/O _____

Dated: _____ *Signature of Dealing Person*