

Application Proforma seeking Rectification of Answer Script (s)

To

Date:

**The Public Information Officer (Examinations)
Dibrugarh University
Dibrugarh-786 004**

1. Name (in CAPITAL Letters): _____

2. Name of the College/Institution from where he/she appeared the concerned examination
: _____

3. Address in full: _____

4. (a) Mobile Number: _____ (b) e-mail: _____

5. Roll Number: _____ 6. Registration Number: _____

7. Name of the Examination (including Semester/Year): _____

8. Name of the Subject (s) sought for rectification of answer script: _____

9. Course Name/Course Code: _____

Note: The applications seeking rectification of answer scripts shall be accepted only for any of the conditions mentioned below: (Please tick the relevant box)

1. If any portion of answer remained unchecked and where no marks have been allotted in the Top Sheet of the answer script (s)
2. If any portion of answer was checked and marks allotted but was not included in the total marks reflected in the Top sheet.
3. If there is an error in counting of total marks in the Top Sheet of the answer script(s)
4. If disparity of marks exist between the Top Sheet and actual marking inside the answer script(s)

(Full Signature of the applicant)