

**INDIRA GANDHI NATIONAL TRIBAL UNIVERSITY, AMARKANTAK**  
**APPLICATION FOR THE RE-TOTALING OF MARKS OF EVALUATED ANSWER SCRIPT(S)**

Candidates should carefully go through the rules printed overleaf before filling in this form.

This application has TO BE FILLED IN AND SIGNED BY THE CANDIDATE ONLY. Application submitted on the behalf of the candidate shall be summarily rejected. Incomplete application form, in any respect, or without the challan of fee deposited shall also be summarily rejected.

<b>1. Name of the Candidate</b> (in BLOCK Letters):			
<b>2. Father's/Mother's Name:</b>			
<b>3. Enrolment No.:</b>			
<b>4. Course in which Enrolled</b>			
<b>5. Last Exam Attended</b>			
<b>6. Details of Papers for which Re-totalling is requested:</b>			
<b>Course Code</b>	<b>Title of the Paper</b>	<b>Marks Obtained</b>	<b>Maximum Marks</b>
<b>7. Total amount paid through Challan</b>		Rs. _____	
<b>8. Date of Fee payment</b>			

Declaration: I have carefully read the rules regarding the re-totalling of marks of evaluated answer books and I agree to abide by the same.

Signature of the Candidate  
Date:

(Office Use only)

Date of Application: .....

Date of Re-totaling: .....

Original Marks: ..... Marks after Re-totaling: ..... Change in marks (if any): .....

Signature of Issuing Authority

COE