


NAAC 2021/ Extended Profile Deviations/ 4

Date: 10/12/2021

Criteria 2.4	Number of revaluation applications year-wise during the last 5 years
Findings of DVV	HEI to provide three sample e-copies of revaluation forms from the assessment years 2016-17, 2017-18 and lastly 2018-19 duly signed by the controller of examinations for metric 2.4
Response / Clarification	Three sample e-copies of revaluation forms duly signed by the controller of examinations & Registrar for each of the assessment years 2016-17, 2017-18 and lastly 2018-19 are added in this document and also available at the Institutes website at https://www.galgotiasuniversity.edu.in/naac-pdfs/DVV-Clarification_2.4.pdf


IQAC Coordinator


Controller of Examination (COE)


Registrar



2.4. Number of Revaluation Applications year-wise during the last 5 years

Galgotias University

Plot No. 2, Yamuna Expressway,
Opposite, Buddha International Circuit,
Sector 17A, Greater Noida,
Uttar Pradesh 203201, India

Academic Session

2016-17



GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

Eve (4)

Chiranjeev

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

1. Name of the Student : Prashant Kumar Tinsori
2. Year & Month of Examination : JULY, 2016
3. Supplementary / Semester : Supplementary
4. Name of the Program : M.C.A.
5. Enrollment No. : 1413208020
6. Admission No. : 14SCSE 208017

Particulars of paper(s) in which re-evaluation is required	Details of Fee remitted
Sr. No. Course Code Course Name Grade Obtained	Amount Rs. _____
1. _____	Dated _____
2. <u>MCA-222 Software Engineering F</u>	Univ. Receipt No. _____
3. <u>MCA-224 Computer Graphics F</u>	
4. _____	
5. _____	
	FEE : Rs. 1000 / - per course (Attach Original fee receipt)

I solemnly declare that :-

1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
2. The result of re-evaluation as and when declared by the University shall be binding upon me even if it affects my results adversely.
3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation.

Specimen Handwriting: In Hindi : _____

In English: _____

Postal Address of the Student (In Capital Letters)

JAWAHAR NAGAR KONCH
DIST- JALAUH

Pin 225205

Email Id Prashant1125002@gmail.com

Prashant Kumar Tinsori
Signature of the Candidate
Dated : 21/10/2016

Documents to be attached: (1) Original Grade-sheet / Certificate. (2) University Receipt No. / Bank DD No. _____

(for use in the Re-evaluation Branch)

- | | |
|---|--|
| 1. Date of Receipt of Form _____ | 6(i) Date of declaration of result _____ |
| | (ii) Date of dispatch of Grade-sheet _____ |
| 2. Receipt No. / Diary No. _____ | 7. Eligible : Yes / No. _____ |
| 3. Amount of Fee paid _____ | 8. Reasons if not eligible _____ |
| 4. Whether original Grade Card attached _____ | |
| 5. Initial of Diarist _____ | |

Assitant _____

Dy. CoE / CoE _____

(Entries below to be filled in by the Exam Branch)

S.No.	Subject	Course Code	Course Name	Grade Obtained
1.	<u>MCA 222</u>		<u>S/W Engrg.</u>	<u>No Change</u>
2.				
3.	<u>MCA 224</u>		<u>Computer Graphics</u>	<u>No Change</u>
4.				

Dealing official _____

REGISTRAR
GALGOTIAS UNIVERSITY
UTTAR PRADESH



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GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : Babbar malik
- 2. Year & Month of Examination : 2016
- 3. Supplementary / Semester : V
- 4. Name of the Program : B. TECH CSE
- 5. Enrollment No. : 1414103042
- 6. Admission No. : _____

Particulars of paper(s) in which re-evaluation is required			Details of Fee remitted	
No.	Course Code	Course Name	Grade Obtained	Amount Rs.
1.	<u>CLE 316</u>	<u>Transportation engg</u>		<u>1000/-</u>
2.				
3.				
4.				
5.				

Dated _____
Univ. Receipt No. _____

FEE : Rs. 1000 / - per course
(Attach Original fee receipt)

I solemnly declare that :-

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : द्वारा हस्ताक्षर
In English : _____

Postal Address of the Student(In Capital Letters)

Delta - II
Greater noida
Pin _____

Babbar
Signature of the Candidate
Dated : _____

Email Id _____

Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form _____
- 2. Receipt No. / Diary No. _____
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

Assitant _____

Dy. CoE / CoE _____

(Entries below to be filled in by the Exam Branch)

Enrollment No. _____

S.No.	Subject	Course Code	Course Name	Grade Obtained
1.	<u>CSC 316</u>	<u>Transportation Engg.</u>		
2.				
3.				
4.				

Dealing official _____

REGISTRAR
GALGOTIAS UNIVERSITY
*** UTTAR PRADESH ***

Grade Change
F to C grade

2016-17



GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : Tanushree Dey
- 2. Year & Month of Examination : 2016 Aug - Sept
- 3. Supplementary / Semester : B.Tech - CSE
- 4. Name of the Program : 1312101163
- 5. Enrollment No. : 13CSE 101143
- 6. Admission No. : _____

Particulars of paper(s) in which re-evaluation is required			Details of Fee remitted	
Sl. No.	Course Code	Course Name	Grade Obtained	Amount Rs.
1.	CSE 312	DBMS	F	2000 + 1000
2.	CSE 461	Cloud Computing	F	
3.	CSE-321	Data Mining	F	
4.	_____	_____	_____	
5.	_____	_____	_____	
				Dated <u>19th/10/2016</u>
				Univ. Receipt No. _____
				FEE : Rs. 1000 / - per course (Attach Original fee receipt)

I solemnly declare that :-

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : सुश्री देव
In English : Tanushree Dey

Postal Address of the Student (In Capital Letters)
B-33/16 Plot 64, Kaushtesh
Marg, Sunderpur, Varanasi
Pin 221005

Tanushree Dey
Signature of the Candidate
Dated : _____

Email Id Tanushreedey24@cloud.com

Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

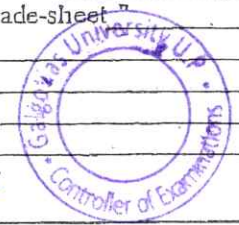
(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form 19/10/2016
- 2. Receipt No. / Diary No. 2000
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____

- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

Assitant

Dy. CoE / CoE



(Entries below to be filled in by the Exam Branch)

Enrollment No.	S.No.	Subject	Course Code	Course Name	Grade Obtained
<u>1312104631</u>	1.	<u>CSE 312</u>		<u>DBMS</u>	<u>No Change</u>
	2.	<u>CSE 461</u>		<u>Cloud Computing</u>	<u>No Change</u>
	3.	<u>CSE -321</u>		<u>Data Mining</u>	<u>No Change</u>
	4.				

Dealing official

REGISTRAR
GALGOTIAS UNIVERSITY
UTTAR PRADESH



Academic Session

2017-18



2017-18

GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

(18)

add
10-11

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : Aman Dineen
- 2. Year & Month of Examination : August / 2017
- 3. Supplementary / Semester : 1/III, 1/II
- 4. Name of the Program : B.TECH CSE
- 5. Enrollment No. : 1413101048
- 6. Admission No. : 14SCSE101089

Particulars of paper(s) in which re-evaluation is required			Details of Fee remitted	
Sr. No.	Course Code	Course Name	Grade Obtained	Amount Rs.
1.	MAT211	Partial Differential	F	2000
2.		Eq ⁿ & Complex Analysis	28/07/17	
3.	CSE 313	Compiler Design	F 26/07/17	Dated 3/10/17
4.				
5.				
				Univ. Receipt No. 221710030017
				FEE : Rs. 1000 / - per course (Attach Original fee receipt)

I solemnly declare that -

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : I design websites and applications
In English : मैं वेबसाइट्स और एप्लिकेशन्स डिजाइन करता हूँ।

Postal Address of the Student (In Capital Letters)
1-2, Third Floor, Pocket 2
Sector - 22, Rohini, Delhi
Pin 110086

Aman Dineen
Signature of the Candidate
Dated : 03/10/17

Email Id aman.dineen15@gmail.com

Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form _____
- 2. Receipt No. / Diary No. _____
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

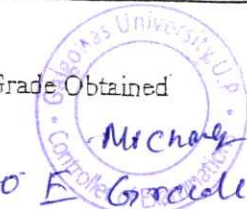
Assitant

Dy. CoE / CoE

(Entries below to be filled in by the Exam Branch)

Enrollment No.	S.No.	Subject	Course Code	Course Name	Grade Obtained
	1.	MAT 211		Partial Differential Equation	Micha
	2.	CSE 313		Compiler Design	F to E
	3.				
	4.				

Dealing official





2017-18

GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : RAZA ALI KHAN
- 2. Year & Month of Examination : Aug, 2017
- 3. Supplementary / Semester : 3rd
- 4. Name of the Program : B.Tech
- 5. Enrollment No. : 1513101477
- 6. Admission No. : 15SCSE101475

Particulars of paper(s) in which re-evaluation is required			Details of Fee remitted	
Sr. No.	Course Code	Course Name	Grade Obtained	Amount Rs.
1.	<u>MAT211</u>	<u>Partial diff. Eq' & Complex Analysis</u>	<u>(F)</u>	<u>1000</u>
2.	<u>23/8/17</u>			
3.				
4.				
5.				

Dated 28/09/17
Univ. Receipt No. 221709220004

FEE : Rs. 1000 / - per course
(Attach Original fee receipt)

I solemnly declare that:-

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : _____
In English : _____

Postal Address of the Student (In Capital Letters)

KP III Royal Paradise
Hostel, Behind Ghade University
Pin _____

Email Id Rz.ali76@gmail.com

Raza Ali Khan
Signature of the Candidate
Dated : 28/9/17

Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form _____
- 2. Receipt No. / Diary No. _____
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

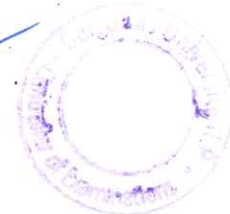
Assitant

Dy. CoE / CoE

(Entries below to be filled in by the Exam Branch)

Enrollment No.	S.No.	Subject	Course Code	Course Name	Grade Obtained
	1.	<u>MAT 211 - Partial Differential Equation</u>			<u>No Change</u>
	2.				
	3.				
	4.				

Dealing official





2017-18

GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

93 (8)

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : Prashant Kr Singh
- 2. Year & Month of Examination : 18+
- 3. Supplementary / Semester : 1st SEM
- 4. Name of the Program : B.Tech
- 5. Enrollment No. : 1514101186
- 6. Admission No. : ISSCME10.1135

Particulars of paper(s) in which re-evaluation is required			Details of Fee remitted	
Sr. No.	Course Code	Course Name	Grade Obtained	Amount Rs.
1.	PHY-III	Modern physics	F	1000/-
2.				
3.				
4.				
5.				

13/10/2017

Amount Rs. 1000/-
Dated 03/10/17
Univ. Receipt No. 231710030003

FEE : Rs. 1000 / - per course
(Attach Original fee receipt)

I solemnly declare that -

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : _____

In English : _____

Postal Address of the Student(In Capital Letters)

H.No 75, Harpal Enclave
Lal Kuan, opp. Reliance
Sector Purb (92b) Pin 202109
Email Id prashant15119@gmail.com

Prashant
Signature of the Candidate

Dated : 03/10/17

Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form 03/10/17
- 2. Receipt No. / Diary No. 231710030003
- 3. Amount of Fee paid 1000/-
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

Assitant

[Signature]
Dy. CoE / CoE

(Entries below to be filled in by the Exam Branch)

Enrollment No.	S.No.	Subject	Course Code	Course Name	Grade Obtained
	1.				
	2.				
	3.				
	4.				

PhyIII - modern physics

No change

Dealing official



Academic Session

2018-19

2018-19

odd

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GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : MUKUL JINDAL
- 2. Year & Month of Examination : 2017 / December
- 3. Supplementary / Semester : V / fifth
- 4. Name of the Program : Accounting for Specific Industries.
- 5. Enrollment No. : 1508101042
- 6. Admission No. : 156SFC 101024

Particulars of paper(s) in which re-evaluation is required			Details of Fee remitted	
Sr. No.	Course Code	Course Name	Grade Obtained	Amount Rs.
1.	<u>BCH-322</u>	<u>Accounting for Specific Industries.</u>	<u>F</u>	<u>1000</u>
2.				
3.				
4.				
5.				

Dated 3/7/18
Univ. Receipt No. 171804030006

FEE : Rs. 1000 / - per course
(Attach Original fee receipt)

I solemnly declare that -

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : मुकुल जिंदल
In English : Mukul Jindal

Postal Address of the Student (In Capital Letters)
S3, GHER KHATTI
NEW MANDI
Pin 251001

Mukul
Signature of the Candidate
Dated : 3/4/18

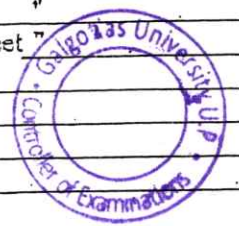
Email Id _____
Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form _____
- 2. Receipt No. / Diary No. _____
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible: Yes / No. _____
- 8. Reasons if not eligible _____

Assitant

Dy. CoE / CoE



(Entries below to be filled in by the Exam Branch)

Enrollment No.	S.No.	Subject	Course Code	Course Name	Grade Obtained
	1.	<u>BCH - 322</u>		<u>A/c for Specific</u>	<u>F to B Grade Change</u>
	2.				
	3.				
	4.				

Dealing official

REGISTRAR
GALGOTIAS UNIVERSITY
UTTAR PRADESH



2018-19

add @

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R. Gouri Shankar
- 149502102102
Ph: 9999046948



GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : R. GOWRISHANKAR
- 2. Year & Month of Examination : 2017, Decan November
- 3. Supplementary / Semester : VII.
- 4. Name of the Program : BA. LLB (Hons)
- 5. Enrollment No. : 1410102096
- 6. Admission No. : 149502102102

Particulars of paper(s) in which re-evaluation is required				Details of Fee remitted	
Sl. No.	Course Code	Course Name	Grade Obtained	Amount Rs.	Dated
1.	BAL714	Public International Law	'F'	1000/-	28/03/2018
2.					
3.					
4.					
5.					

Univ. Receipt No. 191803280006

FEE : Rs. 1000 / - per course
(Attach Original fee receipt)

I solemnly declare that -

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : श्री. श्री. श्री.
In English : R. Gouri Shankar

Postal Address of the Student (In Capital Letters)

N-77 SENIOR CITIZEN
SOCIETY NEAR AMARPA AMRAPALI
HOSPITAL, GR. NOIDA Pin 201308
Email Id gourishankar1696@gmail.com

R. Gouri Shankar
Signature of the Candidate
Dated : 28/03/2018

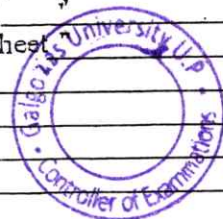
Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form _____
- 2. Receipt No. / Diary No. _____
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

Assitant

Dy. CoE / CoE



(Entries below to be filled in by the Exam Branch)

Enrollment No. _____
S.No. Subject Course Code Course Name Grade Obtained

1.	BAL714	PUBLIC INTL LAW		NO CHANGE
2.				
3.				
4.				

Dealing official

REGISTRAR
GALGOTIAS UNIVERSITY
UTTAR PRADESH



2018-19

3

6



GALGOTIAS UNIVERSITY
UTTAR PRADESH
Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

(Particulars should be filled in by the candidate in his/her own handwriting. Before filling up the re-evaluation form, instructions printed on the backside should be read carefully).

- 1. Name of the Student : DEVESH SHARMA
- 2. Year & Month of Examination : 2017 - NOVEMBER
- 3. Supplementary / Semester : IXth
- 4. Name of the Program : BA-LIB(H)
- 5. Enrollment No. : 1309102022
- 6. Admission No. : 134504102014

Particulars of paper(s) in which re-evaluation is required				Details of Fee remitted	
Sl. No.	Course Code	Course Name	Grade Obtained	Amount Rs.	Dated
1.	<u>BAL 916</u>	<u>NATURAL RESOURCES MGMT.</u>	<u>F</u>	<u>1000/-</u>	<u>27.03.2018</u>
2.					
3.					
4.					
5.					

Univ. Receipt No. _____

FEE : Rs. 1000 / - per course
(Attach Original fee receipt)

I solemnly declare that -

- 1. I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by the same in all respects.
- 2. The result of re-evaluation as and when declared by the University shall be binding upon me even it affects my results adversely.
- 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during re-evaluation process.
- 4. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of re-evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation

Specimen Handwriting: In Hindi : _____

In English :

Postal Address of the Student(In Capital Letters)

401, PPC, OMAHA PALM & GREENS
SEC-14, GURGAON

Pin 201308

Email Id devesh.sharma1801@gmail.com

Signature of the Candidate

Dated : 27.03.2018

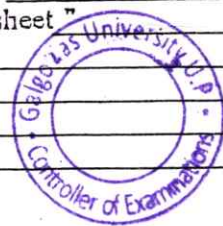
Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.

(for use in the Re-evaluation Branch)

- 1. Date of Receipt of Form _____
- 2. Receipt No. / Diary No. _____
- 3. Amount of Fee paid _____
- 4. Whether original Grade Card attached _____
- 5. Initial of Diarist _____
- 6(i) Date of declaration of result _____
- (ii) Date of dispatch of Grade-sheet _____
- 7. Eligible : Yes / No. _____
- 8. Reasons if not eligible _____

Assitant

Dy. CoE / CoE



(Entries below to be filled in by the Exam Branch)

Enrollment No.	S.No.	Subject	Course Code	Course Name	Grade Obtained
	1.		<u>BAL 916</u>	<u>NATURAL RESOURCES MGMT.</u>	<u>NO CHANGE</u>
	2.				
	3.				
	4.				

Dealing official _____

REGISTRAR
GALGOTIAS UNIVERSITY
UTTAR PRADESH