

Plot No. 2, Sector - 17A, Yamuna Expressway, Greater Noida, Distt.: Gautam Budha Nagar, Uttar Pradesh (India) 203201 Website: www.galgotiasuniversity.edu.in

NAAC 2021/ Extended Profile Deviations/ 4

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 <a href="https://www.galgotiasuniversity.edu.in/naac-pdfs/DVV-Clarification 2.4.pdf">https://www.galgotiasuniversity.edu.in/naac-pdfs/DVV-Clarification 2.4.pdf</a>

**IQAC Coordinator** 

**Controller of Examination (COE)** 

Registrar

Date: 10/12/2021



# 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

# APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

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(for use in the Re-ex	
	Date of declaration of result
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# GALGOTIAS UNIVERSITY UTTAR PRADESE

### Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVALUATION OF ANSWER-BOOKLETS

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2.	Year & Month of Examination :	2016
3.	Supplementary / Semester :	Z.
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	ayeater noida	Signature of the Candidate
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APPLICATION FORM FOR RE-EVAL	HATION OF ANSWER ROOKT ETS
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	Details of Fee remitted
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2. CSF 461 Cloud Compiting F	Univ. Receipt No.
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(for use in the Re-ey	aluation Branch)
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# Academic Session 2017-18



#### GALGOTIAS UNIVERSITY UTTAR PRADESH

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# 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 Refer to Elli

it	astructions printed on the backside should be read carefully).
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2.	Year & Month of Exemposion
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4.	Name of the Program
5.	Enrollment No.
6.	Admission No. 1413101048
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	5 FEE: Rs. 1000/-per course
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	<ol> <li>I have carefully read all the relevant rules / Instructions etc. of the University for re-evaluation and I undertake to abide by</li> </ol>
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0.	evaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation
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<u>D0</u>	cuments to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No.
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\* 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 .	0000
2. Year & Month of Examination	RAZA ALI KHAN
3. Supplementary / Semester	g, 2017 7 29d
4. Name of the Program	
5. Enrollment No.	B. Tech
6. Admission No.	15/3101477
Particulars of paper(s) in which re-evaluation is required	Details of Fee remitted
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In English : Postal Address of the Student(In Capital Letters)	y v v
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Pin Pin	Signature of the Candidate
Email Id Rz. ali 76@ gmail. com	Dated: 21 9 17
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# GALGOTIAS UNIVERSITY UTTAR PRADESH Office of the Controller of Examinations





APPLICATION FORM FOR RE-EVALUATION

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Supplementary / Semester     Name of the Program	Tot Ben	
5. Enrollment No.	3. Tech	
6. Admission No.	514101186	
	155CME 101135	
Sr. Course Course Name Grade Obtained	Details of Fee remitted	
No. Code 1. PHY-III. MODERN PHYSICS F	Amount Rs. 1000/-	
2.	Dated 63/10/13	
2. 3. 18/07/2017	Univ. Receipt No. 23/7/0030003	
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5	FEE: Rs. 1000/-per course	
	(Attach Original fee receipt)	
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the same in all respects.	c. of the University for re-evaluation and I undertake to abide by	
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In English:		
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La Rugn, opp- Reliance	Signature of the Candidate	
petal pumb (926)Pin 202100	Detail	
Email id hard tous 6 bare it and	03/10/17	
Documents to be attached: (1) Original Grade-sheet / Certificate	(2) University Receipt No. / Bank DD No.	
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	Date of dispatch of Grade-sheet	
	ligible: Yes / No.	
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Asssitant	Dy. CoE / CoE	
(Entries below to be filled in by the Exam Branch) Enrollment No.	28 University	
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# Academic Session 2018-19







#### 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). Name of the Student . Year & Month of Examination Supplementary / Semester 4. Name of the Program Enrollment No. 565FC 101024 Admission No. Details of Fee remitted Particulars of paper(s) in which re-evaluation is required Grade Obtained Sr. · Course · Course Name 000 Amount Rs. No Code 204030006 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 3. I shall have no right claim additional chance to appear in an examination in lieu of any chance, which I may lose during adversely. re-evaluation process. The University shall not be liable to pay any compensation/damages whatsoever on account of delay in declaration of reevaluation result of answer book(s) and/or if any mistake is found during the process of re-evaluation 479 and Specimen Handwriting: In Hindi: In English: Postal Address of the Student(In Capital Letters) KWATTI Signature of the Candidate Pin 251001 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) 6(i) Date of declaration of result 1. Date of Receipt of Form

(ii) Date of dispatch of Grade-sheet 7 10 135 Un .7. Eligible: Yes / No. 2. Receipt No. / Diary No. 8. Reasons if not eligible 3. Amount of Fee paid Whether original Grade Card attached Dy. CoE / CoE Asssitant

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

Enrollment No.

S.No.

Course Code

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Course Name

· Grade Obtained

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#### GALGOTIAS UNIVERSITY UTTAR PRADESH

### Office of the Controller of Examinations

	APPLICATION FORM FOR RE-EVALU	JATION OF ANSWER-BOOKLETS
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iT	structions printed on the backside should be read carefully).	· ·
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2.	Year & Month of Examination :	(017, Decen November
3.	Supplementary / Semester :	VII
4.	Name of the Program :	A. LLB (Hous)
	Enrollment No.	410102096
6.		4950L102102
	Particulars of paper(s) in which re-evaluation is required	Details of Fee remitted
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	4	77. 79. 1000 /
	-	FEE: Rs. 1000/-per course
	5	(Attach Original fee receipt)
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	I solemnly declare that -	, of the University for re-evaluation and I undertake to abide by
	the same in all segments	*
	2. The result of re-evaluation as and when declared by the Un	iversity shall be binding upon me even it affects my results
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	evaluation result of answer book(s) and/or if any mistake is	s found during the process of re-evaluation
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en ing	In English: Reform	Vinantar
	Postal Address of the Student(In Capital Letters)	R. Hown Tranklan
	N-77 SENIOR CITTLEN	F. Harr
	SOCIETY NEAR AMARPA AMRAPALI	Signature of the Candidate
	HOSPITHL GOR NOTOM Pin 201308	Dated: 28 03 20 23

Email Id gowishankar 1696 Qgmall can Documents to be attached: (1) Original Grade-sheet / Certificate (2) University Receipt No. / Bank DD No. (for use in the Re-evaluation Branch) 6(i) Date of declaration of result 1. Date of Receipt of Form (ii) Date of dispatch of Grade-sheet .7. Eligible: Yes / No. 2. Receipt No. / Diary No. 8. Reasons if not eligible 3. Amount of Fee paid 4. Whether original Grade Card attached 5. Initial of Diarist \_\_\_\_\_ Dy. CoE / CoE Asssitant (Entries below to be filled in by the Exam Branch)

Enrollment No. \_ S.No.

Course Code

Course Name

· Grade Obtained

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## GALGOTIAS UNIVERSITY UTTAR PRADESH

# Office of the Controller of Examinations

APPLICATION FORM FOR RE-EVA	ALUATION OF ANSWER-BOOKLETS	3
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instructions printed on the backside should be read careful	llv).	
Name of the Student	DEVISH SHAKMIT	GS
2. Year & Month of Examination	2017 MOVEMEBER	• •
3. Supplementary / Semester :	1×+4	
4. Name of the Program :	BALLB(H)	
5. Enrollment No.	1309102022	
6. Admission No.	134501102014	· ·
Particulars of paper(s) in which re-evaluation is required	Details of Fee remitted	
Sr., Course Name Grade Obtained	Amount Rs. 1000/	
No. Code MATURAL MUNE		×
1. PORTE 916 REVOUKSE MYNT. F.	Dated 27th, 03, 2018	
: 2.	Univ. Receipt No.	E
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5.	(Attach Original fee receipt)	
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I solemnly declare that -		* *
I. I have carefully read all the relevant rules / Instructions	s etc. of the University for re-evaluation and I unde	rtake to abide by
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SEC-MU, YRINOIDA	Signature of the Candidate	
Pin 201210	Dated:	1,03,201
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Documents to be attached: (1) Original Grade-sheet / Certif	icate (2) University Receipt No. / Bank DD No.	
	Re-evaluation Branch)	
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3. Amount of Fee paid	8. Reasons if not eligible	10.0
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