

G.VENKATASWAMY NAIDU COLLEGE (AUTONOMOUS), KOVILPATTI -2. (Affiliated to Manonmaniam Sundaranar University, Tirunelveli)

(Reaccredited by NAAC with 'A' Grade | DBT - STAR College scheme)

O/o CONTROLLER OF EXAMINATIONS

APPLICATION FOR RETOTALLING - ESE APRIL/NOVEMBER 20_

1. Stude	ent Details			
Nam	e of the Student:			
Regi	ster Number			
Prog	ramme & Major			
		:		
		ich retotalling is required:		
S.No	Course Code	Course Name	Marks Obtained	
5.110	Course code	Course Name	CIA ESE	
Total	Number of Cours	e (s) for retotalling		
3. Paym	ent Details			
Total	Amount Paid (₹):	Date of Payment:	:	
Mode	of Payment: Cas	h UPI		
Date	of Transaction &	Transaction ID (for UPI):		
4. Decla	ration			
-		nformation provided above is true to the rks awarded after retotalling will be fina	-	_
Date:		Signa	ature of th	ne Student
	Approval e this application	for revaluation.		
Date:		Si	ignature o	f the HoD
6. For 0	Office Use Only			
Date of	of Submission: _			
Receiv	ved By :_			
Applio	cation Number: _			