



# K. R. MANGALAM UNIVERSITY

THE COMPLETE WORLD OF EDUCATION

Ref. No.- KRMU/EXAM/2024-25/ 370

Date: 27/6/2025

## NOTICE

**Subject: Application for Rechecking and Re-evaluation of End-Term Examination Answer Sheets of Even Semester 2024-25.**

This is to inform all students who appeared in the End-Term Examinations Even Semester 2024-25 that the process for rechecking and re-evaluation of answer sheets is now open. Students can apply for rechecking and re-evaluation of answer sheets from **23.06.2025 to 07.07.2025** after following the procedure outlined below.

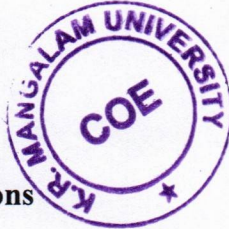
### Application Procedure:

1. **Eligibility:** All students who appeared in the End-Term Examinations Even Semester 2024-25 are eligible to apply for rechecking and re-evaluation.
2. **Rechecking and Re-evaluation Fee:** A fee of Rs.500 per course for Rechecking and Rs.1500 per course for Re-evaluation must be paid along with the application form. Payment can be made at the Accounts Office.

### Important Notes:

- The rechecking and re-evaluation fee is non-refundable.

Controller of Examinations



CC:

1. Vice Chancellor, for kind information
2. All Deans/Directors
3. Examination Coordinators and Coordinators of schools
4. All Faculty
5. Website Developer
6. Office copy
7. Accounts Department
8. Notice Board





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## RE-CHECKING AND RE-EVALUATION OF ANSWER BOOK OF END TERM EXAMINATION

Name (In Capital Letters): \_\_\_\_\_ Roll Number: \_\_\_\_\_  
 School: \_\_\_\_\_ Session: \_\_\_\_\_  
 Programme Name: \_\_\_\_\_  
 Reason for Re-checking and Re-evaluation of answer book: \_\_\_\_\_

I want my answer book of the End Term Examination of the following Courses be Re- checked and Re-evaluated

S.No	Semester	Course Code	Course Title	Grade
1				
2				
3				
4				
5				

\_\_\_\_\_ M.No. \_\_\_\_\_ E-mail Id \_\_\_\_\_ Signature of Student with Date \_\_\_\_\_  
 ----- Accounts/Cashier -----  
 Received Rs. \_\_\_\_\_/- for \_\_\_\_\_ by cash Payment No \_\_\_\_\_ or by  
 DD/Bank Transfer No. \_\_\_\_\_ Dated: \_\_\_\_\_  
 Cashier Name \_\_\_\_\_ Cashier Signature \_\_\_\_\_ Date: \_\_\_\_\_

----- (For office Use only) -----

The Outcome of the Re-checking and Re-evaluation is as Follows: -

S.No	Course Code	Course Title	Old Marks	New Marks	Grade After Re-checking and Re-evaluation	Name of Re-checker/evaluator	Signature of Re-checker/Evaluator with Date
1							
2							
3							
4							
5							

Date:

Signature of CoE