

St. PETER'S INSTITUTE OF HIGHER EDUCATION AND RESEARCH

(Deemed to be University U/S 3 of the UGC Act, 1956)

REVALUATION/RETOTALING FORM

(To be submitted within 10 days of the result published)

Registration Number :

Name of the Candidate :

Programme & Branch of Study :

Month/Year of Examinations :

Whether the Revaluation fee of Rs. 500/- paid per subject : Yes / No
(Enclose a copy of the receipt)

Subjects for which REVALUATION/RETOTALING is requested:

| S.No. | Subject Code | Subject Name | Marks obtained | |
|-------|--------------|--------------|----------------|----|
| | | | CA | EA |
| 1 | | | | |
| 2 | | | | |
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Signature of the HOD

Seal

Signature of the Candidate

Date: