

To
The Controller of Examination
IGIT, Sarang-759146

Sub: Application for Rechecking/Photocopy

Respected Sir

I am furnishing the following information for Rechecking / Photo copy of my answer scripts.

1. Name of the Student:
 2. Name of the Department:
 3. Registration No.:
 4. Institute Roll No.:
 5. Contact Nos.:
 6. Streams (B.Tech./M.Tech./MCA/M.Sc.):
 7. Semester:
 8. Name of the Specialization:
 9. Name of the Subject(s):
 10. Subject Code(s):
 11. Grade Obtained:
 12. Expected Grades (O, E, A, B, C, D):
 13. Expected Mark range:
 14. Demand Draft No.:
- Date: Amount: Rs.

Full Signature of the Student