

**APPLICATION FOR REVALUATION OF ANSWER SCRIPTS OF HIGHER SECONDARY
EXAMINATION FIRST / SECOND YEAR 20.....**

DETAILS OF FEE REMITTED

<i>No. & Date of Chalan</i>	<i>Name of treasury</i>	<i>Amount remitted</i>

1. Name of candidate [in block letters] :
2. Reg. No. :
- [a] Name & Centre Number of School/Centre at which candidate took the Examination :
- [b] Revenue District :

3. **Subject[s] and paper[s] for which revaluation is required**

Sl. No.	Part	Name of paper[s]	Score

4. Whether copy of the Mark list is enclosed : Yes / No
5. Whether applied for scrutiny also [separate application to be given] : Yes / No
6. Address of the candidate to which communications are to be sent [in block letters]

PIN Code _____

Phone No: _____

Place :

Date :

SIGNATURE OF THE CANDIDATE

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Applications should be submitted to the concerned Principal before the last date stipulated.