

***Office of the Controller of Examinations***

*Pokhara Metropolitan City-30, Kaski*

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| --- | --- | --- | --- |
| Applicant’s Name | : | Year | : |
| Sem/Tri/Yearly | : | Faculty | : |
| PU Reg. No. | : | Program | : |
| Exam Roll No. | : | College | : |

I would like to request for ***Re-totaling/Rechecking*** my answer book(s) as mentioned below.

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| --- | --- | --- | --- | --- | --- |
| **S.N.** | **Course**  **Code** | **Course Title** | **Previous**  **Grade/Marks** | **Rechecking**  **(√)** | **Re-totaling**  **(√)** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
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| 6 |  |  |  |  |  |

Date: …………………….. Applicant’s Signature: ………………….

# Recommendations

I agree that the particulars given by Mr./Ms. ……………………………………………….are correct. I hereby recommend for re-totaling/rechecking of the answer book(s) mentioned above.

|  |  |  |
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| ……………………….. | ……………………….. | ……….……………….…….. |
| Seal of the Institution | Date | Signature of Institution Head |

# Required Documents:

Please attach the following document along with this application.

1. Photocopy of result sheet.
2. Bank Voucher\***.**

\* Bank voucher means the voucher required from the Kamana Sewa Bikas Bank, Saving A/C 1200300027317000001 or Nepal Investment Bank Ltd., Saving A/C 01105020011938 after depositing ***Rs. 10/- per Application form and Rs 500/- per course for re-totaling, Rs. 2000/- per course for rechecking***, in the name of PU EXAM CONTROL OFFICE.