

## SRI RAMAKRISHNA INSTITUTE OF TECHNOLOGY

(An Autonomous Institution)



(Approved by AICTE, New Delhi :: Affiliated to Anna University, Chennai)
Pachapalyam, Perur Chettipalayam, Coimbatore - 641010

## Exam Cell

## **Application for Applying Photocopy / Revaluation**

| Name                                    |               |                    |              |                            |  |
|---|---------------|--------------------|--------------|----------------------------|--|
| Class / Department                      |               |                    |              |                            |  |
| Registe                                 | r Number      |                    |              |                            |  |
| Photoco                                 | ppy / Revalua | ation Details      |              |                            |  |
| Sl.No.                                  | Semester      | <b>Course Code</b> | Course Name  | Amount                     |  |
| 1                                       |               |                    |              |                            |  |
| 2                                       |               |                    |              |                            |  |
| 3                                       |               |                    |              |                            |  |
| 4                                       |               |                    |              |                            |  |
| 5                                       |               |                    |              |                            |  |
|   |               |                    | Total        |                            |  |
| Station: Date:                          |               |                    | Signature of | Signature of the Candidate |  |
| Student Copy                            |               |                    |              |                            |  |
| No of Photocopy / Revaluation Applied : |               |                    |              |                            |  |
| Total Amount :                          |               |                    |              |                            |  |
| Received By & Date                      |               |                    | :            | Seal                       |  |