

SRIMANTA SANKARADEVA UNIVERSITY OF HEALTH SCIENCES

NARAKASUR HILLTOP, BHANGAGARH, GUWAHATI-32, ASSAM, INDIA

APPLICATION FOR RECHECKING OF ANSWER SCRIPT (Particulars should be filled in by the candidate in his/her own handwriting) Name of Candidate (in BLOCK CAPITAL) 1. 2. Father' Name Mother's Name 3. Name of Examination 4. 5. Roll No. Examination Centre where appeared 6. Name and address of Institute from where appeared for the examination Name and address of Institute studying at present Paper(s) and marks obtained in the paper(s) in which Rechecking is required: Title of the Paper (as indicated Date of publication Sl. No. Serial No. of question Maximum Date of examination Marks paper (as indicated in of result in question paper) held obtained marks question paper) 10. Have you also applied for re-evaluation separately for any of the above paper(s): Yes/No 11. If yes, please indicate Sl. No. above 12. Amount of fee paid 13. Bank Draft No. and Date Signature of the candidate (Signature must correspond to that in the examination application form) (Name of candidate) is a bonafide student of this institute and had appeared Certified that Examination held on Forwarded for rechecking of the answer script(s) as applied for by the candidate. Principal/Head of the Institute Date Name of Institute (Office seal) Postal address of the Institute:

Instructions to the candidate: PLEASE ATTACH ORIGINAL MARKSHEET AND PHOTOCOPY OF ADMIT CARD attested by the Principal/Head of the College/Institute from where applicant appeared in the examination.

Verified and particulars found correct

Dealing Assistant

PROVISION FOR RECHECKING OF ANSWER SCRIPTS

DEFINITION

Rechecking of Answer Scripts means the work undertaken on receipt of a candidate's application in prescribed format and proper verification of the application form to recheck his/her answer scripts of the paper(s) applied for to ensure that all the questions attempted by the candidate have been valued, the marks awarded have been totalled correctly and that the total marks have been correctly carried over to the marksheet.

PREREQUISITES FOR RECHECKING

- 14. A candidate desirous of rechecking his/her answer script(s) of paper(s) will have to apply for rechecking within 30 days from the date of publication of results. Application for rechecking of answer script(s) received after 30 days from the date of publication of results shall not be entertained.
- 15. Application for rechecking (upto maximum 3(three) papers) will have to be made by the candidate in prescribed format and pariculars should be filled in by the candidate in his/her own handwriting.
- 16. Application must be verified and duly forwarded by the Principal/Head of the Institute to the University for consideration.
- 17. Signature of the candidate in the application form must correspond to that present on the application form for appearing in the examination.
- 18. Application form for rechecking must accompany the prescribed fee (Rs.500.00 per paper, subject to revision from time to time) in the form of bank draft in favour of 'Srimanta Sankaradeva University of Health Sciences' payable at 'Guwahati'.
- 19. It should also accompany photostat copies of Admit Card and Marksheet, attested by the Principal/Head of the College/Institute from where the applicant appeared examination, for verification.
- 20. Application Form complete in all respect must be submitted in the University Office on working days during office hours. Incomplete application forms will be rejected straight away.

RECHECKING

- 6. Application form for rechecking shall be accepted only after verification of all particulars submitted by the candidate and found to be correct.
- 7. Rechecking of the answer scripts applied for by the candidate shall be conducted by an expert/expert committee, appointed for the purpose, after which the University shall convey the result of the rechecking to the candidate through the Principal/Head of the Institute in which the candidate is studying/studied/appeared in the examination.