APPLICATION FOR RE-SCRUTINY OF RESULT

1. Department:………………………………………………………………………….
2. Registration number:………………………………………………………………..
3. Module Code to be re-scrutinized:………………….………………………………..
4. Module name to be re-scrutinized:……………………………………………………
5. Grade Obtained:………………………………………………………………………
6. Name of candidate: Mr/Miss:…………………………………………………………
7. Information about the receipt of payment of Rs ………………………………………

   a. Number of the receipt:

   b. Date:

NOTE: A separate application should be Submitted in respect of each subject applied for.

> Please pay Rs.500/= per module to Finance office or Peoples Bank account of
> University College of Jaffna (Account no: 162-100100045947) ,and attched the receipt.
> Application which does not carry the original receipt will be rejected.

Declaration by the candidate:

I do certify that the above particulars furnished by me are correct. I am aware that this application could be rejected in the event of furnishing incorrect information. I agree to be bound by the rules pertaining to re-scrutiny of results and to accept an upward or a down ward revision of marks and grade as a result of re-scrutiny.

……………….   …………………………..

   Date   Signature of the candidate

Certification:

I do certify that the above candidate is a student of department of ………………………………
and the Registration Number, Module Number, Name and the Grade obtained given here are correct according to the results sheet and that the original receipt obtaintd for payment of fees is pasted overleaf.

……………   ………………………………………

   Date   Signature of the Head of Department