Shri. Swami Vivekanand Shikshan Sanstha's

Vivekanand College, Kolhapur (Autonomous)

PROFORMA FOR VERIFICATION OF ANSWER-BOOKS

To, The Co	ntroller of Examination,			
Vivekaı	nand College, Kolhapur (Autonomo	us).		
Sir,				
l requ	est you for verification of my pap	oer/s of subject/s		
detailed below of		examination. The prescribed	fee of Rs	for each
paper has been paid by me through cash,		on	The receipt of	which is
attached h	nerewith.			
1. Name o	of the Student:			
2. Address	5:			
3. Mobile I	Number:			
4. Details	of Examination:			
a) Name of the Examination		b) Month / Year		
c) Class		d) Semester		
e) Seat Nu	umber			
5. Details	of the subject/s for which Verificat	ion is sought		
Sr. No.	Paper Code / Subject/s Name			
1.				
2.				
3.				
4.				
		Yours fai	thfullv.	
Date:			, ,	
		(Name & Sign	nature of Student)	

Note: Application for Verification of any particular paper or papers shall be made by the examinees themselves within 07 days from the date of declaration of result to the Controller of Examination. Under no circumstances permission shall be granted after the prescribed period.