



Gujarat National Law University

Silvassa

Application Form for Re-evaluation

End-Term Examination: _____

Date: _____

Name of the Student : _____

Current Semester: _____

Registration No.: _____

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Details of Papers:

No.	Name of the Paper	Sem. of Paper	Name of the Teacher/s	Marks scored

I declare that the information furnished above is true. I agree to abide by the decision of Examination Committee with regard to this application / examination.

(Signature of the Student)

: For Office Use Only:

Examination Committee:

(i) No. of papers applied for Re-evaluation: _____, in words: _____
(ii) *Fees: _____

(Examination Committee)

Accounts Section:

Details of fee submitted:

Total amount received: _____

Receipt No.: _____

Date of Payment: _____

Mode of payment: Cash / Cheque / Demand Draft

(Accounts Section)

* Fees: Rs.500/- per Paper.