

# ITM Vocational University, Vadodara



**Application Form for Re-Evaluation form for Month\_\_\_\_\_ Year\_\_\_\_\_**

**Fill Form in Capital Letter**

Name of the Applicant: \_\_\_\_\_

Roll No.: \_\_\_\_\_ Batch / Year: \_\_\_\_\_

Programme: \_\_\_\_\_ Stream: \_\_\_\_\_

Courses for which Re-valuation applied for.

S. No.	Semester	Subject Code	Course Title	Fee
1				
2				
<b>Total Payable Fee</b>				

**Student Signature**

**For Office Use Only**

Verified by (AR-Examination): \_\_\_\_\_

Eligible / Not Eligible

Remark of Account Department:

Fees Payment Receipt No.: \_\_\_\_\_

Signature of Account Officer: \_\_\_\_\_

Signature (Controller of Examination)