



# Dr. N.G.P. INSTITUTE OF TECHNOLOGY

(An Autonomous Institution)

Approved by AICTE, New Delhi & Affiliated to Anna University, Chennai

Recognized by UGC and Accredited by NAAC with 'A+' Grade & NBA (BME, CSE, ECE, EEE & MECH)

Kalapatti Road, Coimbatore-641048.

## OFFICE OF THE CONTROLLER OF EXAMINATIONS

### ANSWER SCRIPT REVIEW REQUEST FORM

Date: \_\_\_\_\_

Register Number					
Name of the Candidate					
Month and Year of Examination		April-May / Nov-Dec		Year	20____
Programme	B.E./B.Tech./M.E./MBA	Branch		Year & Semester	
<b>Details of Courses Applied for REVIEW</b>					
S.No.	Sem.	Course Code	Course Name	Amount (Rs.)	
1					
2					
3					
				<b>TOTAL</b>	

**Signature of the Student**

<b>Recommended by</b>	
<b>Tutor (Signature with Name and Date)</b>	<b>HoD</b>

**Approved By**

**PRINCIPAL**

**Administrative Officer**

<b>Details of Fee Payment</b>		
<b>Amount: Rs.</b>	<b>Receipt No.</b>	<b>Date:</b>

<b>For Office Use Only</b>	
<b>Verified by</b>	
Name	
Signature	
Date	
<b>CoE</b>	