ADIKAVI NANNAYA UNIVERSITY

RAJAHMUNDRY – 533 296

APPLICATION FOR REVALUATION

(To be filled in by the candidate who wish to apply for Revaluation)

1. **Name of the Candidate :**
2. **Name of the Examination :**
3. **Title of the paper(s) in which Revaluation is sought :**

   i.

   ii.

   iii.

   iv.

   v.

   vi.
4. **Register No :**
5. **Name of the College & Place :**
6. **Address of the Candidate :**

   :

   :

   :

   Contact Number Phone/Mobile :
7. **Whether the required fee of Rs.750/- Per each paper by way of Demand Draft in favour of The Registrar, Adikavi Nannaya University has Been Paid, if so the DD in original should be enclosed to the requisition.**

   DDNo: Bank Name: Date:

I agree to abide by the rules and regulations of the University pertaining to revaluation.

Station:

Date : Signature of the Candidate

Note: 1. Whether the candidate should be enclosed specimen handwriting on separate sheet.

2. The Candidate should enclose a self addressed envelops 9" x 4".

Signature of the Principal
(with College Stamp/Seal)