



WOMEN UNIVERSITY, SWABI

APPLICATION FORM FOR RECHECKING/RE-TOTALING OF ANSWER BOOKS (RS.1500)

Fill in this form legibly in CAPITAL BLOCK LETTERS in your own handwriting. Incomplete Forms or Forms containing incorrect information will not be entertained.

Candidate's Name: _____

Father's Name: _____

University Registration No: _____

University Enrollment No: _____

College/ Centre of Examinations: _____

Examination (B.A/B.Sc)	Session	Annual/Supply	Result Declaration Date

SUBJECT(S) WHICH ARE DESIRED TO BE RECHECKED

Subject	Papers	Marks Obtained	Total Marks

Fee of Rs. _____ (Rupees) _____

Deposited Vide Women University, Swabi Main Campus/UBL Receipt No/Bank Draft _____

Dated: _____ in the name of Treasurer Women University, Swabi for the Purpose of Rechecking of Answer Books.

Justification for Rechecking

IMPORTANT NOTE:

1. Rechecking is allowed within a period of Fifteen (15) days after the declaration of result.
2. No Rechecking is allowed for the Practical/Viva Voce/Project/Thesis Examination.
3. In Islamiyat (Compulsory) subject, Rechecking is allowed who fails by NOT MORE THAN THREE (3) MARKS and Pakistan Study Rechecking is allowed who fail by NOT MORE THAN TWO (2) MARKS.

Signature of Student

Attestation from Concerned College Principal

Address: _____

Signature.....

Name.....

Cell No. _____

Office Seal.....