

**MIRPUR UNIVERSITY OF SCIENCE & TECHNOLOGY (MUST),  
MIRPUR AZAD JAMMU & KASHMIR**



**CONTROLLER OF EXAMINATIONS**

**Application Form for Re-Checking of the Answer Book/Result**

**To,**

**The Controller of Examinations,**  
Mirpur University of Science & Technology (MUST),  
Mirpur, Azad Jammu & Kashmir.

**Subject: Application of Re-Checking of the**

Sir,

With reference to the subject cited above, I want to apply for re-checking of my Answer Book/Result \_\_\_\_\_ declared on \_\_\_\_\_.

Following are my details for re-checking.

1. Name: \_\_\_\_\_
2. Father's Name: \_\_\_\_\_
3. Examination: \_\_\_\_\_
4. Degree Program: \_\_\_\_\_ 5. Year: \_\_\_\_\_
6. Roll No.: \_\_\_\_\_ 7. Registration No.: \_\_\_\_\_
8. Subject/Paper for which re-checking is applied: \_\_\_\_\_
9. Name of Department/Faculty/Institution from which appeared \_\_\_\_\_
10. Amount Paid: \_\_\_\_\_ 11. Bank receipt No. and date of fee paid.: \_\_\_\_\_
11. Remarks (please write any additional information, which may help in rechecking of paper):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Full Address:** \_\_\_\_\_

Remarks of the officer attesting the form: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature and stamp of attesting officer**  
\_\_\_\_\_  
\_\_\_\_\_

## **REGULATIONS**

- The Controller of Examinations or an officer authorized by him may receive an application in the prescribed form addressed to the Controller of Examinations accompanied by the prescribed fee (deposited in authorized bank) \_\_\_\_\_ per paper.
- The application (duly filed along with fee) for rechecking must be received within 30 days from the date of declaration of particular result.
- The attested photocopy of candidate National Identity Card, photocopy of University student Identity card (if issued) and photocopy of result card must be enclosed with application.