



# SGT UNIVERSITY

SHREE GURU GOBIND SINGH TRICENTENARY UNIVERSITY  
(UGC Approved University) GURGAON, Delhi-NCR

## OFFICE OF THE CONTROLLER OF EXAMINATIONS

### Re-Checking Report Format

Subject Code: \_\_\_\_\_  
Answer Book Code \_\_\_\_\_  
Semester/Year: \_\_\_\_\_  
Examination: \_\_\_\_\_

Subject Name: \_\_\_\_\_  
Programme: \_\_\_\_\_

Tick the appropriate:

- |                           |  |
|---------------------------|--|
| 1. Increase in the marks: | 2. Question checked but marks not given: |
| 3. No change observed:    | 4. Question(s) unchecked:                |

Brief Description/Comment on the above ticked statement:

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Total no. of change in marks observed: Increase \_\_\_\_\_ / Decrease \_\_\_\_\_

Name and Signature of the Re-Checker: \_\_\_\_\_

Employ ID: \_\_\_\_\_ Faculty \_\_\_\_\_

Mobile No. \_\_\_\_\_ E Mail ID \_\_\_\_\_

Considerations of Original Evaluator/HOD/Dean

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Signature with Date: \_\_\_\_\_

Name of the Original Evaluator/HOD/Dean: \_\_\_\_\_

Employ ID: \_\_\_\_\_

Mobile No. \_\_\_\_\_

### For Office Use Only

The Above case is produces to the COE for his/her kind approval for further proceedings/result Preparation.

Suptd./Section Officer Remarks:.....

Suptd./Section Officer

Controller of Examinations