

ANNEXURE - 2

APPLICATION FOR RE-EVALUATION

	Date:
Form No	Session
Roll No. Enrolment No.	Centre Code:
Centre Name and Address:	
1. Name of Student in Capital Letters	
	Space for passport size
2. Father's / Guardian's Name	photograph duly attested,
	duly attested,
3. Mother's Name	
	Signature of Candidate
4. Date of Birth 5. Sex	6. Nationality
M/F/O.	
8. Tick Here: Caste : SC ST OBC 7. Relig	gion
9. Postal Address	
	Pin Code
10. Mobile No.	
11. E-mail	
12 Details of Evermination massed for weighter with	
12. Details of Examination passed from vidhyapeeth	
Examination Passed Year of Passing Roll Number	er Marks Obtained Percentage

13. Subjects for Re-Evaluation required:	
1.	
2.	
3.	
4. 5.	
6.	
14. DETAILS OF FEES PAID:	
Demand Draft No.: Date:	
Amount:	
10.Documents to be enclosed: (i) Copy of Marksheet certificate (ii) Demand Draft.	
Note : (i) Demand Draft should be drawn in favour of Swami Satyanand Vidhyapeeth payable at Kashipur	
(U.S.Nagar) Uttarakhand - 244713	
(ii) Form should be filled in with Black ball pen only.	
Ison/daughter ofdo hereby declare that the particulars furnished above are correct to the best of my knowledge and belief. I will fully responsible for any false and misleading information found at any stage. I also declare that I shall abide by the rules and regulation and terms & conditions issued by Swami Satyanand Vidhyapeeth form time to time	
Signature of the Parents/Guardian Signature of the Student	
Date: Place :	