

## UTKAL UNIVERSITY VANI VIHAR, BHUBANESWAR-4

No
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## APPLICATION FOR PHOTOCOPY OF ANSWER SCRIPT

То	The Controller of Examinations,								
	Utkal University, Vani Vihar,								
	Bhubaneswar-751004.		- 4						
Sir,									
D	I furnish the following particulars for								•••••
Pape	r of Subject fo	)[			E	xamınaı	tion.		
	PARTICULARS FOR PH	отос	OPY	OF A	NSW	ER SC	RIPT		
1.	Name of the Applicant	:							
2.	Postal Address		Nam	e					
			C/o						
			Post						
			Via						
			Dist.				Pin	l	
3.	Name of the Examination	:							
4.	Date of Examination		. 156						
5.	Name of the College								
6.	Name of the Examination Centre								
7.	Roll No.								
8.	Registration Number	:							
9.	Name of the Subject, Paper in deta for which Photocopy wanted	ails :							
10.	Date of Publication of Result								
11.	Xerox copy of Admit Card	:							
12.	Xerox Copy of Memo Form from								
	the College/Centre in support						New		
	of despatch of Answer Script.								
13.	Details of deposit								
	Name of the Bank			Cha	allan N	lo			
	Date of deposit			An	nount				
	(Original Challan to be enclosed)	)							
				Si	anatu	re of th	e App	licant	
		Addre	ss						

- N.B. :1. The application should be submitted within forty two days from the date of publication of Result.
  - 2. Incomplete application is liable to be rejected.
  - 3. Fees per Script Rs. 300/- only.