

Sector 16-C, Dwarka, New Delhi-110078, Website: http://www.ipu.ac.in

Examination Division

No. IPU/Exam/COE(O)/2013-14/4019

Dated: 13.03.2014

NOTICE

Subject: Implementation of "Regulation for Inspection of Answer Sheets & Providing Certified Copies of Answer Sheets".

In pursuance of this University "Regulation for inspection of answer sheets & providing certified copies of answer sheets" notified vide F. No. IPU/EXAM/Registrar/2013-14 dated 19.12.2013 & relevant provisions of University Ordinances pertaining to rechecking of evaluated answer sheets, the fee & application procedure for Rechecking/ Inspection/ Provision of Certified Copies of evaluated answer sheets with effect from December 2013 – January 2014 Examinations shall be as under:

- 1. Applications for Providing Certified Copy of evaluated answer sheet(s) shall be submitted strictly as per "Format-A" enclosed herwith. The requisite fee of Rs. One Thousand Two Hundred (1,200/-) per paper, in favour of Registrar, Guru Gobind Singh Indraprastha University is to be deposited in the Indian Bank, Guru Gobind Singh Indraprastha University Branch within stipulated time. The Bank Challan in original must be submitted alongwith the application.
- 2.Applications for Inspection of evaluated answer sheet(s) shall be submitted strictly as per "Format-B" enclosed herewith. The requisite fee of Rs. One Thousand (1,000/-) per paper, in favour of Registrar, Guru Gobind Singh Indraprastha University is to be deposited in the Indian Bank, Guru Gobind Singh Indraprastha University Branch within stipulated time. The Bank Challan in original must be submitted alongwith the application.
- 3. Applications for Rechecking of evaluated answer sheet(s) shall be submitted strictly as per "Format-C" enclosed herewith. The requisite fee of Rs. Three Hundred (300/-) per paper, in favour of Registrar, Guru Gobind Singh Indraprastha University is to be deposited in the Indian Bank, Guru Gobind Singh Indraprastha University Branch within stipulated time. The Bank Challan in original must be submitted alongwith the application.

(Prof. Pravin Chandra)
Controller of Examinations (O)

Copy to:

- 1. All Deans, University School of Studies, GGSIP University.
- 2. Controller of Finance, GGSIP University
- 3. All Directors, GGSIP University
- 4. All Directors/Principals of the Affiliated Colleges of GGSIP University.
- 5. Chairman, UCIITM, GGSIPU with a request for uploading the same on the University website.
- 6. Joint Registrar (Planning & Policy), GGSIP University
- 7. PS to Vice Chancellor for kind information of Hon'ble Vice Chancellor.
- 8. PS to Registrar for kind information of Registrar
- 9. Manager, Indian Bank, GGSIP University, Branch.
- 10. Guard File.



Sector 16-C, Dwarka, New Delhi-110078, Website: http://www.ipu.ac.in

Examination Division

Application Form for Certified Copy of Evaluated Answer Sheet(s)

Important Note: The filled in application form with the requisite fee @ Rs 1,200/- per paper duly forwarded by the Dean of concerned USS or Director/ Principal of concerned affiliated institute, should be submitted to office of the Controller of Examinations (Operations), Guru Gobind Singh Indraprastha University, Sector-16 C, Dwarka, New Delhi-110078, within 15 days from the date of notification of the respective results.

		THE RESERVE THE PROPERTY OF TH		The state of the s		
1	Name of th	e Student/Applicant:				
2		ther/ Guardian:				
		n the University records)		-		
3	Enrollment					
4	Name of the USS/ Affiliated Institute:					
5	Programme	·				
6	Year and Month of Examination:					
7	Date of Declaration/ Notification of Result:			×		
8	Date of Application:			9		
9	Address for Correspondence:					
10	Phone Numbers:					
11	Email ID:			1		
12	Details of the Fee submitted, Amount (In Rs.):					
13	Indian Bank Challan No:					
14			checking f	fee, if any, as per clause 6(F) of the R	egulation:	
15	Bank Account number & Name of the Bank Account holder:					
16	Name of the Bank and the Branch:					
17	Description of Answer Sheet requested for Certified Photocopy:					
	Semester	Paper Code & Subject				
(i)						
(ii)						
(iii)						
(iv)						
(v)						
(vi)						
18	Undertaking by the applicant: I do hereby undertake that I shall strictly abide by the University rules 8 regulations governing rechecking, inspection & provision of certified photocopies of evaluated answe sheets. Further I do hereby undertake that neither shall I indulge in any act which may be prejudicial to the maintenance, preservation, safety and security of the answer sheets nor unauthorized or improper use of information received pursuant to this request in any manner which is likely to prejudicially affect the interests of the University or its functionaries. Signature of the Applicant					
19				2.8.144		
13	ā					
	Dean/ Dir					
102000	Space for					
20						



Sector 16-C, Dwarka, New Delhi-110078, Website: http://www.ipu.ac.in

Examination Division

Application Form for Inspection of Evaluated Answer Sheet(s)

Important Note: The filled in application form with the requisite fee @ Rs 1,000/- per paper duly forwarded by the Dean of concerned USS or Director/ Principal of concerned affiliated institute, should be submitted to office of the Controller of Examinations (Operations), Guru Gobind Singh Indraprastha University, Sector-16 C, Dwarka, New Delhi-110078, within 15 days from the date of notification of the respective results.

	DCIIII 11007	o, within 15 days from th	c date of fi	othication of the respective results.		
1	Name of th	e Student/Applicant:				
2	Name of Father/ Guardian: (as stated in the University records)					
3	Enrollment					
4	Name of th	e USS/ Affiliated Institute	:			
5	Programme	e/Course:				
6	Year and Month of Examination:					
7	Date of Declaration/ Notification of Result:					
8	Date of Application:					
9	Address for Correspondence:					
10	Phone Numbers:					
11	Email ID:			9		
12	Details of the Fee submitted, Amount (In Rs.):					
13	Indian Bank Challan No:					
14	Bank accou	nt details for refund of re	-checking f	fee, if any, as per clause 5(G) of the Re	egulation:	
15	empositional content and	int number & e Bank Account holder:				
16	Name of the Bank and the Branch:					
17	Description of Answer Sheet requested for Inspection:					
	Semester Paper Code & Subject					
(i)						
(ii)						
(iii)		V				
(iv)						
(v)						
(vi)						
18	Undertaking by the applicant: I do hereby undertake that I shall strictly abide by the University rules & regulations governing rechecking, inspection & provision of certified photocopies of evaluated answer sheets. Further I do herby undertake that neither shall I indulge in any act which may be prejudicial to the maintenance, preservation, safety and security of the answer sheets nor shall I resort to any unauthorized or improper use of information received pursuant to this request in any manner which is likely to prejudicially affect the interests of the University or its functionaries nor shall I engage in any uncalled for argument with the official facilitating the inspection of answer sheets. Signature of the Applicant					
19						
	Dean/ Director/ Principal of USS/ Institute					
	Space for					
20	·					



Sector 16-C, Dwarka, New Delhi-110078, Website: http://www.ipu.ac.in

Examination Division

Application Form for Rechecking of Evaluated Answer Sheet(s)

Important Note: The filled in application form with the requisite fee @ Rs 300/- per paper duly forwarded by the Dean of concerned USS or Director/ Principal of concerned affiliated institute, should be submitted to office of the Controller of Examinations (Operations), Guru Gobind Singh Indraprastha University, Sector-16 C, Dwarka, New Delhi-110078, within two weeks days from the date of declaration/notification of the respective results.

IACAA F	New Delin-110078, within two weeks days from the date of declaration, notification of the respective results.								
1		e Student/Applicant:							
2	Name of Fa								
3	Enrollment								
4	Name of th								
5	Programme/Course:								
6	Year and Month of Examination:								
7	Date of Declaration/ Notification of Result:								
8	Date of Application:								
9	Address for Correspondence:								
10	Phone Numbers:								
11	Email ID:								
12	Details of t								
13	Indian Ban	k Challan No:							
14	Description	of Answer Sheet requested for Rec	hecking:						
	Semester	Paper Code & Subject							
(i)									
(ii)									
(iii)									
(iv)									
(v)									
(vi)									
(vii)									
(viii)									
(ix)									
(x)									
		ng by the applicant: I do hereby und							
	regulations governing rechecking of evaluated answer sheets. Further I understand that scope of								
4-	rechecking of evaluated answer sheets covers correction of totaling mistakes & evaluated unevaluated answers only.								
15									
			Signatu	re of the Applicant					
16			-						
	Dean/ Director/ Principal of USS/ Institute								
	Space for Official Use:								
17									