



SCHOOL OF ELECTRICAL AND COMMUNICATION
DEPARTMENT OF ELECTRONICS AND COMMUNICATION ENGINEERING

CIA RETEST – APPLICATION FORM

B.Tech. ECE/M.Tech. EST

| | | | | |
|------|------|-------|-------|-----------|
| UT I | MT I | UT II | MT II | Model Lab |
|------|------|-------|-------|-----------|

Semester: ODD/EVEN

Date of Application:

| | | | |
|----------------------------|--|----------------|--|
| Name of the Student | | VTU NO. | |
|----------------------------|--|----------------|--|

Sir/Madam

I, hereby request you to kindly permit me to apply for retest for the below mentioned courses.

| Date of Exam | Course Code & Title | Reason for Absence | Recommendation | Name & Signature of Course Handling Faculty Member |
|---------------------|--------------------------------|---------------------------|-----------------------|---|
| | | | Yes / No | |
| | | | Yes / No | |
| | | | Yes / No | |
| | | | Yes / No | |
| | | | Yes / No | |
| | | | Yes / No | |

Signature of the Student

Recommendation by Mentor

Yes, the student has informed in prior the reason for absence before the exam(s) mentioned above.
(Please strikeout the course(s) in the above table, if not informed in prior and sign aside)

Signature of the Mentor

HOD ECE