ST/Confi/309/Or-16/21-22   Form No. 109
Application No. **153617**
Appendix-I

APPLICATION FOR REASSESSMENT OF ANSWER BOOKS

Case No. : ☐

To,
The Deputy / Asstt.Registrar (Confidential),
Sant Gadge Baba Amravati University,Amravati.

Sir,

    I, the undersigned Examinee, am submitting this application for Reassessment of Answer book/s,without obtaining the photocopy of the Answerbook/s. I declare that I have read and understood the provisions of the relevant Direction No. **16 of 2019** and I accept all the terms and conditions of the said Direction of the University.
I have paid the fee of **Rs. 400** in cash vide the University's receipt No. _____ dated_____ / by D.D. No._____
dated_____ drawn on _____ Bank, payable at Amravati in the name of Registrar, Sant Gadge Baba Amravati University,Amrvati.

The details are as under :

a) Name of Examinee   :   **SHIVGANGA NANDKISHOR DUGANE**

b) Name of Examination   :   **FOUR YEAR B.E. SEMESTER : FOURTH (ELECTRONICS & TELECOMMUNICATION ENGG.) (CBCS)**

c) Year of Examination   :   **Summer 2024**

d) Roll No.   :   **23BG310483**

e) Centre No.   :   **312**

f) Subject/Paper(s)applying for reassessment :

      i. **(16229) ANALOG AND DIGITAL COMMUNICATION**
      ii. **(16230) ANALOG CIRCUITS**

g) Date of declaration of General Result :   **13-08-2024**

h) Reason for Reassessment   :

I declare that the above information is true and correct to the best of my knowledge.
I enclosed herewith my original marksheet.

Place: _____   (Signature of applicant)
Date : **23-08-2024**   Complete Postal Address: **AT- SARANGPUR,PO- MEHKAR,,MEHKAR,MEHKAR,Maharashtra,443301**
Encl:
Cash receipt No._____Dt._____   Phone/Mobile No. **7028413688**
OR D. D. No._____ Dt._____   Alternate No. _____
Original Marksheet

* IMPORTANT INSTRUCTIONS TO THE EXAMINEE *

1. The fee of **Rs.200/-** per subject / paper for reassessment to be paid with the application failing which application shall be rejected.
2. Incomplete application in any respect and/ or application received **after 15 days** from the date of the declaration of the general result of concerned examination shall be rejected and the fee paid for this purpose shall not be refunded under any circumstances. No application shall be reconsidered, once it is rejected.
3. **Original Marksheet shall be submitted with this application failing which application shall be rejected.**

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