

AL-AMEEN ENGINEERING COLLEGE

(AUTONOMOUS) ERODE - 638 104

ST-04

		OFFICE OF I	HE CONTRO	JLLEK OF E	XAMINA I IONS				
		Re	evaluation A	pplication F	orm				
Examir	ations			Sem & Dep	em & Dept.:				
Registe	r Numb	er:			Date of Submission	of Submission:			
Name of the Student:						eceipt No.:			
S. No.	No. Sem Course Code Course Name				Amount (Rs.500 / Script)				
1									
2									
3									
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5									
	Application Fee	Rs. 50/-							
					Total Amount				
Signature									
		Student	Mentor	HOD	Cashier	COE Office			
*Note: C	ne Stude	nt can apply photoc	opy for a maximur	n of 5 scripts					
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ENGINE	ERING	AI ARE	en engi	JEEDING	COLLEGE				

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OFFICE OF THE CONTROLLER OF EXAMINATIONS Revaluation Application Form												
Examinations					Sem & Dept.:							
Registe	r Numb	er:	Date of Subr			Submission:	ıbmission:					
Name o	f the St	udent:		Receipt No			•					
S. No.	Sem	Course Code		Course Name			Amount (Rs.500 / Script)					
1												
2												
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4												
5												
	Rs. 50/-											
	1 Amount											
Signature												

HOD

Cashier

COE Office

Student

*Note: One Student can apply photocopy for a maximum of 5 scripts

Mentor