

Approved by AICTE, New Delhi | Affiliated to Anna University, Chennai Accredited by NAAC with 'A' Grade #27, Thayanur, Tiruchirappalli - 620009

Office of the Controller of Examinations

Application for Correction in Grade Sheet

Name of the Candidate					
Register Number					
Degree and Branch					
Type of Correction(s) (tick)			Name/Date of Birth/Others Specify if others:		
Correction(s) Reques	sted				
Mionin and Year Ol Exam		Printed in the Sheet Correct Detail to be Printed in the Grade Sheet			
Total Number of Grade Sheets					
Enclosed the Copy of SSLC/HSc Mark Sheet for the Correction of Name or Date of Birth			Yes/No/NA		
Enclosed the Original Grade Sheet(s)			Yes/No		
Place:					
Date:					ature of the Candidate
Mentor (Applicable for the current stud		Head of the Department			
Principal					
For Office Use					
Fee			Assistant		
Fee Paid and Date			Grade Sheet Issued on		
Serial Number			Folio Number		

Deputy Controller of Examinations