



UTKAL UNIVERSITY
APPLICATION FORM FOR ISSUE OF PAPERWISE MARKS
(To be filled in by the candidate)

1. Name of the Candidate
2. Name of the Examination with Year & Month
3. (a) University Roll Number
- (b) University Registration Number
4. College from which appeared
5. Centre from which appeared
6. Subjects offered
7. Division/ Class /Hons. / Distinction
in which placed or failed.

To
 The Registrar,
 Utkal University, Vani Vihar, Bhubaneswar-751004.

Sir,
 I furnished above the particulars about myself and request that a Paper-wise Marks may kindly be issued in my favour.

Date.....

.....
(Signature of the Candidate)

Address.....

*Mobile-.....

Token No.....

Date.....

TO BE FILLED IN BY THE CANDIDATE

Name.....

Examination with Year & Month.....

Roll No.....

Date.....

Signature of Receiving Officer