

# MAHARAJA BIR BIKRAM UNIVERSITY

AGARTALA, TRIPURA, INDIA, PIN: 799004

## APPLICATION FORM FOR REVIEW OF MARKS

(All should be written in capital letters)

NAME OF THE STUDENT : .....

DEPARTMENT : .....

FATHER'S NAME : .....

MOTHER'S NAME : .....

CLASS ROLL NO : .....

REGISTRATION NO : .....

AADHAR NO : .....

Details of Examination appeared by the candidate

Name of the Course	Semester I		Semester II		Semester III		Semester IV		Supplementary	
	Paper Code	Obtained Marks	Paper Code	Obtained Marks	Paper Code	Obtained Marks	Paper Code	Obtained Marks	Paper Code	Obtained Marks
Exam. Roll No. (for each semester)										

I certify that the particulars made by me in this application form are correct and best of my knowledge.

Signature of the Candidate

Address : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mobile : \_\_\_\_\_