

# TKM College of Engineering, Kollam

(Govt. Aided and Autonomous)

## Form – E3

 $\label{eq:production} \textbf{A} \textbf{PPLICATION} \ \textbf{F} \textbf{ORM} \ \textbf{TO} \ \textbf{AVAIL} \ \textbf{THE} \ \textbf{SERVICE} \ \textbf{OF} \ \textbf{SCRIBE}$ 

1.	Name of the candidate [in capital letters]	:		1
2.	Register Number/Roll No.	:	Affix recent	
3.	Programme	:	passport size/stamp size	
4.	Semester	:	photo here	
5.	Branch	:		
6.	Course[s] / Subject[s] for which the service of scribe is needed	:		
	(i)			
	(ii)			
	(iii)			
	(iv)			
	(v)			

(vi)

### DECLARATION

I hereby declare that the information furnished above is true and correct.

Place:

Date:

Signature of Candidate:

Countersigned by the HoD:

#### **DECLARATION FORM FOR SCRIBES**

- Name and Address of the scribe [in capital letters] :

   Affix recent passport size/stamp size photo here
   Date of Birth :
- 3. Details of educational qualifications/ examinations appeared:

- Name and Register No. of the student for whom the scribe is appearing
- 5. Specimen signature of the scribe

#### DECLARATION

:

:

I hereby declare that the information furnished above is true and that I have not qualified/appeared for any examinations other than those mentioned in the Appointment of Scribes under section 2.6.3of the Examination Manual.

Place:

Date:

Signature of Scribe:

Countersigned by the DCoE:

## TKM College of Engineering, Kollam



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#### Form – E4

#### **APPLICATION FORM FOR REVIEW (UG)**

Name of Student	:	
Register Number	:	
Programme	:	
Mobile No	:	
Name of Exam (as in portal)	:	
Course Code	:	
Course Name	:	
Branch	:	
Email ID	:	
Date of publication of Revaluation result		
Account details of student		
Account No. Name of bank	:	
IFSC		
Branch		

## Declaration

I am aware that in case of no grade change after the review, I will not be eligible for refund of the fee paid and also that there will not be an option for a valuation / re-evaluation after review.

Signature and Name of Student:

Date:

# Recommendation by Faculty member

Recommended by:

Signature, Name, ID

Endorsement by HoD:

Checklist:

- □ Application for review (completely filled up and signed)
- □ Recommendation by faculty member (completely filled up and signed)
- $\hfill \Box$  Tabulation sheet for review (completely filled up and signed)
- $\Box$  Proof of fee paid

#### TABULATION SHEET FOR FACULTY WHO RECOMMENDS FOR REVIEW

Name of Student:

Course code:

Register Number

Course Name:

Alpha Numeric code:

Name of faculty:

ID:

Question No.		Evaluation by recommending faculty		to be filled in by Recommending faculty	
		Maximum Marks	Mark to be awarded	Remarks	

Signature:

Total mark :(in words: .....

Signature, Name, ID & Designation