

MAHARAJA SURAJMAL INSTITUTE OF TECHNOLOGY
C-4, Janak Puri, New Delhi-110058

Date: 13-06-2020

NOTICE FOR SUBMISSION OF RE-CHECKING of ANSWER SHEET/INSPECTION OF ANSWER SHEET (Fee & Form)

The students of final year are hereby notified that the 7th semester results have been declared by the GGSIPU University. Those students who wish to apply for Re-checking of Answer Sheets/ Inspection of Answer Sheet are hereby instructed to deposit the re-checking/Inspection of Answer Sheet fee in the Institute's account through online transfer as per attached **Format A, B & C**. The Re-checking fee/Inspection of Answer Sheet fee must be deposited in the institute's account positively by 19.06.2020 and the copy of transaction proof & scanned copy of Application form as per Format A, B & C may be sent by mail to examcell@msit.in for instant verification. Also, it is mandatory to fill the following Google form after submission of re-checking or inspection of answer sheet fee. **The complete details regarding rechecking/inspection of answer sheet/certified copy of answer sheets is given at the attached university notice.**

Google Form <https://forms.gle/NtkZdVCDxaHGuF4RA>

The Details of the Bank Account in which the re-checking fee/inspection of answer sheet fee to be deposited is as under:-

Account Holder's Name : Maharaja Surajmal Institute of Technology

Account No. : 175901000001658

IFSC Code : IOBA0001759

Bank Name : Indian Overseas Bank

Branch : C-Block, Janak Puri, New Delhi-110058

(Dr. K. P. Chaudhary)
Director

Copy to:-
All HODs
College Website

EXAMINATION DIVISION

No. GGSIPU/EXAM/2020/1136

Dated: 11th June 2020

NOTICE

Sub: Rechecking / Inspection of Evaluated Answer Sheets

It is brought to the notice of all the Dean/Director/Principal of University School of Studies and affiliated Institutes/Colleges that the results for the End Term Examinations, December 2019 & Examination held thereafter have been declared/ will be declared shortly. To facilitate all those students who intend to apply for rechecking/inspection of evaluated answer sheets/ obtaining certified copies of evaluated answer sheets. Due to closure of the University on account of COVID-19 Pandemic and in order to regularize the process within stipulated time, the following procedure will be followed till the situation improves:

A. Procedure to be followed by the student:

1. The students intending to apply for rechecking/inspection of answer sheets and obtaining certified copies of evaluated answer sheet may download the application form annexed with this notice and fill the form manually.
2. The students are required to pay requisite fee to their respective School/Institute/College through online mode. Thereafter, the students are required to scan the duly filled application form and the copy of the fee receipt submitted by him/her and e-mail it to their concerned School/Institute/College within 15 working days from declaration of the result on University website. For more information on the purpose, the students may contact their respective School/Institute/College. The details of fee are as under; -

S. No.	Type of Rechecking as per the Regulation	Requisite fee/ answer sheet	Application Format
1.	Rechecking of evaluated answer sheets	Rs. 500/-	Annexure "A"
2.	Inspection of evaluated answer sheets	Rs. 1,200/-	Annexure "B"
3.	Providing Certified copies of evaluated answer sheets	Rs. 1,500/-	Annexure "C"

In addition to above, all those students whose result were declared before lockdown/or in lockdown period and were not able to fill the application form, may submit their applications through the above procedure within 15 days from issue of this notice.

B. Procedure to be followed by the Schools/Institutes/Colleges:

1. The School/Institute/College after receipt of scanned application form and fee from their students will prepare a consolidated list of students mentioning the paper codes in which the students intend to apply. The format shall be as under:

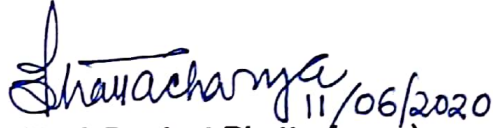
S. No.	Prog. Name	Enrollment No.	Student Name	Paper Code	Paper Name	Type (Rechecking/ Inspection/ Certified Copy)	Amount

2. The total fee received by the School/Institute/College should be submitted in the University Account through NEFT/RTGS/ECS etc. The details of the same are as under:

1.	Account Holder Name	Registrar, Guru Gobind Singh Indraprastha University
2.	Account No.	927860555
3.	IFSC Code	IDIB000G082
4.	Bank Name	Indian Bank
5.	MICR Code	110019071
6.	Account Type	SB (Saving)
7.	CBS Code/Branch Code	02029
8.	Branch Name & Address	GGSIU, Sec. 16C, Dwarka, New Delhi - 110078
9.	Banker's Phone No.	011-28035244
10.	Remarks	Rechecking, Inspection & Certified Copy Application Fee

3. The consolidated list duly certified by the Dean/Director/Principal of the School/Institute/College should be submitted in Hard Copy to the Examination Division within stipulated period as mentioned in the Regulation.

The Examination Division after verifying the list submitted by the School/Institute/College & fee details with Finance & Accounts Department, will take necessary action as provided in the Regulation.

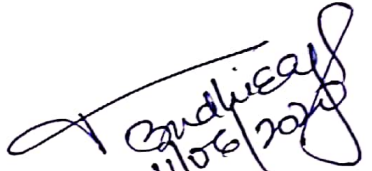

(Prof. Prodyut Bhattacharya)
Controller of Examinations (Incharge)

No. GGSIPU/EXAM/2020/

Dated: 11th June 2020

Copy to:

1. Dean/Director/Principal of USS & affiliated Institutes/colleges.
2. All Examination Officers, Examination Division
3. A.R. to Hon'ble Vice-Chancellor – for information please.
4. A.R. to Registrar – for information please.
5. P.S. to Controller of Finance – for information please.
6. Office copy


(Naveen Budhiraja)
Assistant Registrar to COE



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
SECTOR 16C, DWARKA, NEW DELHI - 110078

EXAMINATION DIVISION

Application Form for Rechecking of Evaluated Answer Sheet(s)

Important Note: The filled in application form with the requisite fee @ Rs. 500/- per paper duly forwarded by the Dean of concerned USS or Director/ Principal of concerned affiliated institute, should be submitted to office of the Controller of Examinations, Guru Gobind Singh Indraprastha University, Sector-16C, Dwarka, New Delhi – 110078, within 15 days from the date of declaration/ notification of the respective results.

1	Name of the Student/ Applicant:	
2	Name of Father/ Guardian: (as stated in the University records)	
3	Enrollment Number of Student/ Applicant:	
4	Name of the USS/ Affiliated Institute:	
5	Programme/ Course:	
6	Year and Month of Examination:	
7	Date of Declaration/ Notification of Result:	
8	Date of Application:	
9	Address for Correspondence:	
10	Phone Numbers:	
11	Email ID:	
12	Details of the Fee submitted, Amount (in Rs.):	
13	Indian Bank Challan No.:	
14	Description of Answer Sheet requested for Rechecking:	
	Semester	Paper Code & Subject
	(i)	
	(ii)	
	(iii)	
	(iv)	
	(v)	
	(vi)	
	(vii)	
	(viii)	
	(ix)	
	(x)	
15	<p>Undertaking by the applicant: I do hereby undertake that I shall strictly abide by the University rules & regulations governing re-checking of evaluated answer sheets. Further I understand that scope of rechecking of evaluated answer sheets covers correction of totaling mistakes and evaluation of unevaluated answers only.</p> <p align="right">Signature of the Applicant</p>	
16	<p align="center">Dean/ Director/ Principal of USS/ Institute</p>	
17	<p>Space for official use:</p>	



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
SECTOR 16C, DWARKA, NEW DELHI - 110078

EXAMINATION DIVISION

Application Form for Inspection of Evaluated Answer Sheet(s)

Important Note: The filled in application form with the requisite fee @ Rs. 1,200/- per paper duly forwarded by the Dean of concerned USS or Director/ Principal of concerned affiliated institute, should be submitted to office of the Controller of Examinations, Guru Gobind Singh Indraprastha University, Sector-16C, Dwarka, New Delhi – 110078, within 15 days from the date of declaration/ notification of the respective results.

1	Name of the Student/ Applicant:	
2	Name of Father/ Guardian: (as stated in the University records)	
3	Enrollment Number of Student/ Applicant:	
4	Name of the USS/ Affiliated Institute:	
5	Programme/ Course:	
6	Year and Month of Examination:	
7	Date of Declaration/ Notification of Result:	
8	Date of Application:	
9	Address for Correspondence:	
10	Phone Numbers:	
11	Email ID:	
12	Details of the Fee submitted, Amount (in Rs.):	
13	Indian Bank Challan No.:	
14	Bank account details for refund of re-checking fee, if any, as per clause 5(G) of the Regulation:	
15	Bank Account Number & Name of the Bank Account holder:	
16	Name of the Bank and the Branch:	
17	Description of Answer Sheet requested for Inspection:	
	Semester	Paper Code & Subject
	(i)	
	(ii)	
	(iii)	
	(iv)	
	(v)	
	(vi)	
18	<p>Undertaking by the applicant: I do hereby undertake that I shall strictly abide by the University rules & regulations governing rechecking, inspection & provision of certified photocopies of evaluated answer sheets. Further I do hereby undertake that neither shall I indulge in any act which may be prejudicial to the maintenance, preservation, safety and security of the answer sheets nor shall I resort to any unauthorized or improper use of information received pursuant to this request in any manner which is likely to prejudicially affect the interests of the University or its functionaries nor shall I engage in any uncalled for argument with the official facilitating the inspection of answer sheets.</p> <p align="right">Signature of the Applicant</p>	
19	<p align="center">Dean/ Director/ Principal of USS/ Institute</p>	
20	Space for official use:	



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
SECTOR 16C, DWARKA, NEW DELHI - 110078

EXAMINATION DIVISION

Application Form for Certified Copy of Evaluated Answer Sheet(s)

Important Note: The filled in application form with the requisite fee @ Rs. 1,500/- per paper duly forwarded by the Dean of concerned USS or Director/ Principal of concerned affiliated institute, should be submitted to office of the Controller of Examinations, Guru Gobind Singh Indraprastha University, Sector-16C, Dwarka, New Delhi – 110078, within 15 days from the date of declaration/ notification of the respective results.

1	Name of the Student/ Applicant:	
2	Name of Father/ Guardian: (as stated in the University records)	
3	Enrollment Number of Student/ Applicant:	
4	Name of the USS/ Affiliated Institute:	
5	Programme/ Course:	
6	Year and Month of Examination:	
7	Date of Declaration/ Notification of Result:	
8	Date of Application:	
9	Address for Correspondence:	
10	Phone Numbers:	
11	Email ID:	
12	Details of the Fee submitted, Amount (in Rs.):	
13	Indian Bank Challan No.:	
14	Bank account details for refund of re-checking fee, if any, as per clause 6(F) of the Regulation:	
15	Bank Account Number & Name of the Bank Account holder:	
16	Name of the Bank and the Branch:	
17	Description of Answer Sheet requested for Certified Photocopy:	
	Semester	Paper Code & Subject
(i)		
(ii)		
(iii)		
(iv)		
(v)		
(vi)		
18	<p>Undertaking by the applicant: I do hereby undertake that I shall strictly abide by the University rules & regulations governing re-checking, inspection & provision of certified photocopies of evaluated answer sheets. Further I do hereby undertake that neither shall I indulge in any act which may be prejudicial to the maintenance, preservation, safety and security of the answer sheets nor shall I resort to any unauthorized or improper use of information received pursuant to this request in any manner which is likely to prejudicially affect the interests of the University or its functionaries.</p> <p align="right">Signature of the Applicant</p>	
19	<p align="center">Dean/ Director/ Principal of USS/ Institute</p>	
20	Space for official use:	