



**EXAMINATION BRANCH
OSMANIA UNIVERSITY, HYDERABAD-500 007**

APPLICATION FORM FOR OBTAINING PHOTOCOPY OF ANSWER SCRIPT
(To be filled in, signed and submitted by the concerned candidate only)

1. Candidates Name					
2. Father's Name					
3. Contact Details	Mobile:			e-mail:	
4. Details of Examination	Course	Year (Ist/ IInd/ IIIrd/ IVth)	Semester (Ist / IInd)	Hall Ticket No.	
					Exam Year with month
5. Paper(s) for which Photocopy of answer script is desired	1.				
	2.				
	3.				
	4.				
	5.				
	6.				
6. Amount paid vide NEFT/ RTGS (OR) CASH DEPOSIT	Name of Bank	D.D.No	Date	Amount	
7. Address for correspondence	H.No/ FlatNo.:		Village/Mandal:		
	Road No:		District/City:		
	Street/Locality:		State:	PIN:	

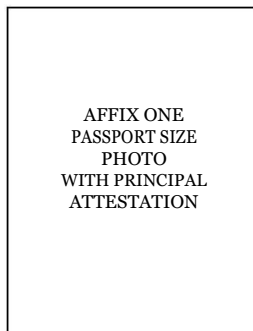
IDENTIFICATION CERTIFICATE

(To be signed by the Principal of the college where the candidate is studying/last studied)

This is to certify that Mr./ Mrs./Miss, _____ son / daughter of _____ bearing HT No.: _____ is the bonafide student of our college and has appeared for the _____ Examination of Osmania University held in (Month-Year) _____. Further, it is certified that the candidate has signed in my presence.

Signature of the candidate:

Date:



Signature of the Dean

(with seal)

INSTRUCTIONS

1. This application will be accepted upto 15days from the date of publication of results.
2. A photocopy of the hall ticket with downloaded memo is to be enclosed along with the application.
3. The prescribed Fee for providing photocopy of the answer sheet is Rs. 1000/- per paper which shall be paid , through **NEFT/ RTGS (OR) CASH DEPOSIT** from any nationalized bank drawn in favour of 'The Registrar, Osmania University, Exam Fee Fund A/c No. 52198262033'. In no case the fee is refundable.
4. The copy of the answer sheet will be sent to the candidate only by post.
5. **The candidates should apply for revaluation / recounting (which ever is applicable) separately.**

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RECEIPT

Received application form for obtaining photocopy of the answer script from Mr./Mrs./Miss _____ bearing HT No.: _____ course _____, Year _____ / Semester _____ for the following papers:

- | | |
|----|----|
| 1. | 2. |
| 3. | 4. |
| 5. | 6. |

Amount Paid: _____ Bank/ DD No.: _____

Date:

Signature of the receiver