The application form has to be printed on legal size paper only

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	Cheque.No	Date	Amount	
7. Address for correspondence	H.No/ Flat No.:		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.

AFFIX ONE PASSPORT SIZE PHOTO WITH PRINCIPAL ATTESTATION

Signature of the candidate:

Date:

Signature of the Principal

(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, Exam Fee Fund,OU, 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 (whichever is applicable) separately.**

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OSMANIA UNIVERSITY, HYDERABAD-500 007

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/ Cheque.No.:

Date: Signature of the receiver