



RKUUNIVERSITY

**Faculty of Doctoral Studies
& Research**

REASSESSMENT APPLICATION FORM

PhD Coursework Examination

Name of PhD Scholar:- _____

Faculty:- _____ Specialization:- _____

Appl. Reg. No.:- _____ Admission Batch:- _____

Details of Reassessment

Sr. No	Subject Name (to be reassessed)
1	
2	
3	

CERTIFICATE

I hereby confirm that all the details provided above are correct & agree that the result declared after reassessment will be considered as my final result for the above examination.

Date:

Signature of PhD Scholar

For Office use only

The PhD scholar has paid sum of Rs. _____ as reassessment fees
(Rs. 400/- per subject) for _____ subjects.

Seal of Faculty of Doctoral Studies & Research

Signature of Dean

- Note:** - 1. Application for reassessment will be accepted within 15 days from declaration of result.
2. Application must be accompanied by DD or 'At Par Cheque' payable to 'RK University'.