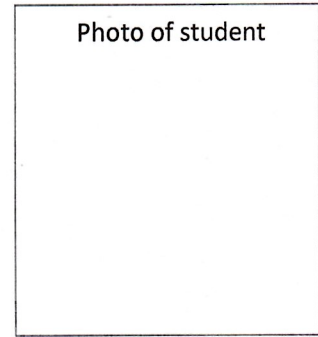


Annexure A

UNDERTAKING



It is certified that, I (Name of Student) S/o, D/ of Sh.....
(Name of Father), resident of
..... giving my undertaking as given below:

7. That, I appeared in end semester examination under University Roll No. Semester/Year It is certified by me that I have attached copy of Admit Card/Voter Card/Ration Card/and any other identify proof.
8. That, the photocopy of this answer book will be used only by me and no other evaluator or person can misuse this copy.
9. That, I cannot challenge the evaluation/markings at any stage/condition.
10. That, I have deposited total Rs in the University office Vide DD No./Receipt No. dated @ Rs 1000/- per answer book for the photocopy of answer book.
11. That, I will be the only custodian of the photocopy of the answer book which I have received from the University. It will be remained within my custody and I cannot misuse it and no person other than me, will be custodian of this photocopy.
12. That, in case I misuse the photocopy which I have received from the University, then University shall take action under the unfair means and sent the case to UMC committee for taking necessary action as per rule.

It is certified that above undertaking are true and nothing has been hidden.

Signature of Student

FORM-3

APPLICATION FORM TO SEE/TO GET PHOTOCOPY OF ANSWER BOOK
HIMACHAL PRADESH TECHNICAL UNIVERSITY, VPO. Daruhi, Tehsil & HAMIRPUR-
177001

(Established under State Legislative Act-16 of 2010)

STUDENT DETAILS

NAME OF THE STUDENT:					
FATHER'S NAME:					
UNIVERSITY ROLL NO.					
COURSE:					
BRANCH:					
EXAMINATION SESSION:					
CONTACT NUMBER:					
CORRESPONDENCE ADDRESS:					
PERMANENT ADDRESS:					
NAME OF THE COLLEGE:					
NAME OF THE EXAMINATION CENTER:					
MODE OF PAYMENT:		Demand Draft No.		Date	
POS (ATM)/Demand Draft (√)					
DETAILS OF SUBJECTS TO BE SEE/TO GET PHOTOCOPY OF ANSWER SCRIPTS					
Subject Code	Subject Title	Date of declaration of concerned Results	Marks/ Grade Obtained	Semester	Scheme

Important Instructions for the Students:

6. Students have to submit this form to **SEE/TO GET PHOTOCOPY OF ANSWER SCIRPTS w.e.f. 01.04.2025 to 10.04.2025** along with **undertaking** attached at **annexure-A**.
7. The fee @ **Rs1500/-** per answer book to be paid at the University fee counter in the form of **POS (ATM Card /Credit Card)** or **Demand Draft** in the favour of **Finance Officer, Himachal Pradesh Technical University, , VPO. Daruhi, Tehsil & Hamirpur**, payable at Hamirpur (H.P.).
8. Students will have to submit the filled application form by hand at university counter or by post to following address:” **Assistant Registrar (Exam.) H.P. Technical University, VPO. Daruhi, Tehsil & Hamirpur (H.P.) 177001”**.
9. The form received after **10.04.2024** will not be entertained and will be rejected straight way. The University will not be responsible for any postal delay.
10. It is **Compulsory** to attach concerned result copy with this form.

DECLARATION:-

I hereby declare that I have read all the instructions and the entries made by me in the form are correct and true to the best of my knowledge.

Date:

Signature of Student

FORM-2

(APPLICATION FORM FOR RE-CHECKING OF ANSWER BOOK)



HIMACHAL PRADESH TECHNICAL UNIVERSITY
(Established under State Legislative Act-16 of 2010)

PROCESS OF RE-CHECKING:

Re-Checking will be done by university staff to check total of marks and to verify any unmarked question and Student have no right to challenge the marks awarded by the examiner.

STUDENT DETAILS

NAME OF THE STUDENT:				
FATHER'S NAME:				
UNIVERSITY ROLL NO.				
COURSE:				
BRANCH:				
EXAMINATION SESSION:				
CONTACT NUMBER:				
CORRESPONDENCE ADDRESS:				
PERMANENT ADDRESS:				
NAME OF THE COLLEGE:				
NAME OF THE EXAMINATION CENTER:				
MODE OF PAYMENT:	Demand Draft No.	Date		
POS (ATM)/Demand Draft (✓)				
DETAILS OF SUBJECTS TO BE RE- CHECKED				
Subject Code	Subject Title	Date of declaration of concerned Results	Marks/ Grade Obtained	Semester Scheme

Important Instructions for the Students:

- Students have to submit this form for **re-checking e. f. 01.04.2025 to 10.04.2025** the fee **Rs. 500/-** per answer scripts to be paid at the University fee counter in the form of **POS (ATM Card /Credit Card)** or **Demand Draft** in the favour of **Finance Officer, Himachal Pradesh Technical University, VPO. Daruhi, Tehsil & Distt. Hamirpur**, payable at Hamirpur (H.P.).
- Students will have to submit the filled application form by hand at university counter or by post to following address:” **Assistant Registrar (Exam.) H.P. Technical University, VPO. Daruhi, Tehsil & Distt. Hamirpur (H.P.) 177001**”.
- The form received after **10.04.2025** will not be entertained and will be rejected straight way.
- The University will not be responsible for any postal delay.
- It is **Compulsory** to attach concerned result copy with this form.

DECLARATION

I hereby declare that I have read all the instructions and the entries made by me in the form are correct and true to the best of my knowledge.

Date:

Signature of Student