

APPLICATION FORM FOR GETTING XEROX COPY OF ANSWER SCRIPT

1. Name of the Candidate :
2. Father's Name :
3. Name of the Institution (**with code**) :
4. State whether the candidate is studying or completed the course and left the Institution. If left the Institution please give the full postal address (**in Capital letters**) with pin code for communication :
5. Branch of study and Semester :
6. Register Number :
7. Name of the subject for which Xerox copy is required :
(Separate application should be submitted for each paper)
8. Code Number of the Question Paper :
9. Marks obtained :
10. Amount Paid : **Rs.100/-**
11. Name of the Bank and Branch :
12. Demand Draft No. and Date :
Drawn in favour of **Additional Director of Technical Education (Examination)**
payable at Chennai
The candidates should **write their Name and Register Number** on the reverse side of the Demand Draft.

Mode of receiving Xerox copy

- 1) Xerox copy of Answer scripts will be sent to the Institution address for those students who are currently studying in the Polytechnic colleges (ie. Xerox copy of the Answer scripts of subjects in I, II, III, IV and V semester only). Students those who are applied for Xerox copy of Answer Papers, should contact the Principal, to get the copy.
- 2) For those students who have completed the course of study, the Xerox copy of the Answer scripts will be sent to the address furnished by them in column 4 of the application. They should also enclose a self addressed unstamped cover (Big Size) with the application.

Undertaking : 1) I agree to the above mode of receiving the Xerox copy of Answer script.

2) The information furnished in the application is true to the best of my knowledge.

Signature of the Candidate