



## Mianz International College

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## APPLICATION FOR RE-CHECKING

### Your personal details

Full Name	<input type="text"/>		
Student Number	<input type="text"/>	National ID card Number	<input type="text"/>
Contact Number	<input type="text"/>	Email ID	<input type="text"/>

### Course details

Course Name	<input type="text"/>	Batch Number	<input type="text"/>
Faculty	<input type="text"/>	Campus	<input type="text"/>

### Examination Script Details

Subject Name	<input type="text"/>	Subject Code	<input type="text"/>
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A separate form should be filled for each examination paper to be marked

### Declaration

I declare that all the information given in this form are accurate and true. The College may verify information provided herein from appropriate sources.

Date	<input type="text"/>	Signature	<input type="text"/>
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### Fees

examination script will be marked only upon payment of MVR 250

### To be filled by the Reception / Finance

Payment Received by	<input type="text"/>	Stamp	
Date	<input type="text"/>		Signature

### For Examiners Use Only

#### To be filled after marking the script

Please Tick the appropriate statement

There has been changes after remarking

There has been NO changes after remarking

#### This part should be filled ONLY if there is a change in the marks after remarking

Marks before remarking  Marks after remarking

THIS FORM MUST BE ATTACHED TO THE EXAM PAPER AND RETAINED

### OFFICE USE ONLY

Received by:	Date:	Form complete: Yes / No	Date student notified of result:
Date Faculty notified:		Record amended by:	Letter reference: