



PUNJAB Education Foundation



APPLICATION FORM FOR RECHECKING OF THE ANSWER BOOKS

Ref. No. _____

Date: _____

To,

Director ADU
Punjab Education Foundation,
Lahore.

Dear Madam,

It is requested that, I want to apply for rechecking of papers. My particulars are given below.

Please fill the form in **BLOCK LETTERS**.

Examination	EVS		QAT/Phase: 15 th EVS		
School Code/ Application No.		Tehsil		District	
School Name					
Name of Applicant					
Address:	_____ _____				
Land Line No.		Mobile No.			
Subject(s) / Class(s) for which checking is applied for					

Bank Detail:

Name of Bank	The Bank Of Punjab Model Town Branch, Lahore	Branch Code	0009	Account #	SSA-006042-000-3	Amount Paid	10,000/-
Branch		Challan No.		Date			

Regulations:

The authorized officer may on receipt of an application in the prescribed form accompanied by prescribed fee (deposited in any online branch of BOP bank) addressed to the Director ADU satisfy himself that:

1. The result of the school has been correctly compiled and declared (this will include checking of answer-books, award lists and result sheets) provided that it will not include re-evaluation of the candidates' answer book.
2. The application for rechecking must be received within 20 days from the date of declaration of result in the office of ADU.
3. Enclose photocopy of Bank Challan/ Deposit slip. (Rechecking fee is non refundable whether school is declared pass or fail after rechecking)

I hereby declare that all the particulars mentioned above are correct and that in case of any difficulty arising out of inaccuracy therein, I shall be responsible for the consequences. I have attached all the required documents. I have read the regulations and shall abide by them.

Yours Obediently,

Signature:



