



# സ്കോൾ-കേരള

വിദ്യാഭ്യാസം, പുറംതൊഴിലും, തിരുവനന്തപുരം

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## APPLICATION FOR REVALUATION OF ANSWER SCRIPTS OF DCA EXAMINATION (..... BATCH)-20.....

1. Name of Candidate (in block letters) : .....
2. Reg No. : .....
- a) Name & Centre Number of School : .....
- b) District : .....
3. Subject and Papers for which valuation is required

Sl.No.	Subject	Name of Paper	Score

4. Whether copy of Mark list enclosed :  Yes  No
5. Address of the Candidate to which Communication are to be sent (in block letters) : .....  
.....  
.....  
Pincode: .....  
Phone No: .....

### DETAILS OF FEE REMITTED

#### Online Remittance

Transaction No.	Date	Amount

#### Offline Remittance

No. & Date of Chalan	Name of Post Office	Amount

Application should be submitted to the concerned Principal before the last date

Place:

Date:

Office Seal

**Principal**  
(DCA Study Centre)