

MODALITIES

SELF INSPECTION OF EVALUATED ANSWER SCRIPTS BY THE EXAMINEE OF VIDYASAGAR UNIVERSITY, MIDNAPORE

Date : 25-07-2012

In addition to the Rules and Regulations adopted for Review of evaluated answer scripts, following modalities are laid down for Implementation with immediate effect in respect of various Postgraduate and Undergraduate Examinations, 2012 onwards of Vidyasagar University.

1. The Photocopy of the evaluated answer script(s) (except practical papers and papers for compulsory Languages and Environmental studies) may be obtained by an examinee concerned once only for self inspection on submission of application to the Controller of Examinations of the University in prescribed format (**FORMAT – I**) available in the university website (www.vidyasagar.ac.in) and on payment of Rs. 400/- (Rupees four hundred only) per answerscript.
2. Above application format for photocopy of evaluated answer script(s) for the purpose of self-inspection may be submitted within 20 (twenty) days from the date of publication of results of the concerned examinations. No application shall be entertained after the period specified above.
3. The Principal/Teacher-in-Charge of the affiliated colleges / HOD of the Academic department must forward all such applications together with the application fees to the University in a consolidated manner in prescribed format (**FORMAT – II**) and within the aforesaid date.
4. The Photocopy of the evaluated answer script(s) will be handed over to the concerned examinee ordinarily after thirty days and within 60 days from the last date of submission of such applications provided that
 - a. The photocopy of evaluated answer script(s) which is/are not under review/re-examination, will be handed over to the concerned examinee for self-inspection within the stipulated time as mentioned above after another round of scrutiny and making necessary rectifications in the evaluated answer script(s), Tabulation sheet and mark sheet, if so required.
 - b. The photocopy of the evaluated answer script(s) which is/are under review examination will be handed over to the concerned examinee for self inspection only after the publication of review results.
5. The examinees shall have to appear with original marksheet of the concerned examination to take delivery of the photocopy of the evaluated answer script(s) for self-inspection on the specific date and time as may be intimated by the University and to acknowledge the receipt of the same.
6. The University shall not entertain any claim for redressal of grievances of the concern examinee arising out of self inspection relating to evaluation of answer scripts.
7. The examinees may submit their observations to the controller of examinations if the error is found in case of total marks of the answer scripts or unmarked question(s) *etc.*

APPLICATION FOR PHOTOCOPY OF EVALUATED ANSWER SCRIPT(S) FOR SELF INSPECTION

To
The Controller of Examinations
Vidyasagar University
Midnapore-721102

Respected Sir,

I would like to obtain photocopy/photocopies of _____number(s) of answer script(s) for the purpose of my self-inspection only for which I am furnishing my particulars as hereunder and remitting Rs (Rupees _____only) herewith:

a. Name (in Block Letter) :.....

b. Mobile number(10 Digit) : [Grid for 10 digit mobile number]

c. Name of the Examination and Year :.....

d. Roll :..... Number :.....

e. Subjects and Paper number(s) for which photocopy is sought for self-inspection. (Subjects and Paper(s) to be written in abbreviated form as shown in the marks sheet)

(Photocopy of marks sheet shall have to be attached)

f. Subjects and papers sought for review of answer scripts under the relevant Regulation of the University

g. Subjects and papers sought for both review and self inspection

Declaration

I declare that the statements given above are true and that if any of the statements is found to be false, my application shall be liable to be rejected by the University without any intimation to me and further that I shall not claim for refund of the fees remitted.

Full Signature of the Examinee with date

Counter signature of The Principal /The Teacher-in-Charge

College/Mahavidyalaya

Counter signature of The HOD, Vidyasagar University

To
 The Controller of Examinations.
 Vidyasagar University,
 Midnapore-721102,

Sir,

I do hereby forward _____ number of application forms submitted by the examinees who appeared _____ Examinations 20__ and seeking photocopy /photocopies of evaluated answer script(s) for the purpose of self-inspection only with requisite fees through DD, bearing number _____ dated _____ for Rs (Rupees _____ only) drawn on _____ in favour of Vidyasagar University payable at Midnpore.

The particular of the examinees category-wise and roll no wise are stated below:

| Sl. No | Category (BA/B Sc/B.Com) (MA/M Sc/M.Com) | Roll | NO. | Subject | Paper(s) | Amount of fees remitted |
|--------------|--|------|-----|---------|----------|-------------------------|
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| TOTAL | | | | | | |

The Principal /The Teacher-in-Charge _____ :.....
Head, PG Department, Vidyasagar University _____ :

(With official seal and photocopy of mark sheet)

OBSERVATION BY THE STUDENT AFTER SELF INSPECTION OF THE EVALUATED ANSWER SCRIPTS
 [All the observation to be submitted together to the controller of examinations within 10 days]

To
 The Controller of Examinations.
 Vidyasagar University,
 Midnapore-721102,

Respected Sir,
 I have inspected answer script of _____ examinations in
 _____(subject) and paper _____thoroughly and after inspection I would like
 to submit the following observation /findings

| Question Number | OBSERVATION | | | Remarks of the University Authority |
|-----------------|--|--------------------------------|--------------------------|-------------------------------------|
| | Please tick(√) the appropriate boxes of column | | | |
| | Mistake in Grand total | Mistake in Question wise total | Non-evaluated answer | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

I would therefore request you to kindly consider my observation and oblige.
 Yours obediently,

 Signature of the Student with Date

Name :

Roll : No :

Mobile No :

Verified by HOD of the concerned college :

Forwarded by

The Principal /The Teacher-in-Charge :

Head, PG Department, Vidyasagar University :

(With official seal and photocopy of mark sheet)