अभियांत्रिकी महाविद्यालय झालावाड़

(राजस्थान सरकार का स्वायत्तशाषी संस्थान) सुनेल रोड, झालरापाटन, झालावाड़, राजस्थान⊢326023 टेलिफोनः +91-07432-242811, 242812 ई—मेलः principalgecj@gmail.com

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ENGINEERING COLLEGE JHALAWAR

(An Autonomous Institution of Government of Rajasthan)
Sunel Road, Jhalrapatan, Jhalawar, Rajasthan- 326023
Tel.No.+91-07432-242811, 242812
Email:principalgecj@gmail.com

Website:www.gecj.ac.lin

वेबसाईट: www.gecj.ac.in Ref. No.GECJ/24-25/

Notice

Revaluation and View Answer copy form (B.Tech)

All the students who have given B.Tech I Sem. (Main/Back) Exam 2023-24 are here by informed that they can fill online form for Revaluation and view answer copy. The Last date for filling Revaluation and view answer copy online form is 10/06/2024 upto 03:00 PM.

Condition for Students:

1. Revaluation fees is Rs.800/- per paper

2. View Answer copy fee is Rs.1000/-Per Paper

3. Revaluation is not permitted in Mid-term, Sessional & Practical examination.

4. No consideration after mentioned time and date.

Note:-

- 1. Candidates can apply for Revaluation maximum in 4 appeared papers.
- 2. Candidates can apply for View answer Copy in all appeared papers.
- 3. It is mandatory to all main/back students to submit the application form (format enclosed)

Principal

Copy to:-

1. PA to Principal

2. All HOD For circulation among student B.Tech I Sem (Main/Back) Exam.

3. FIC Accounts/AAO-II is here by informed to make arrangement to deposite fees & submit the challan to RTU KOTA by online mode as per enclosed order.

4. FIC Webmaster to upload on college website.

f FIC EXAM

राजकीय अभियांत्रिकी महाविद्यालय झालावाड़

(राजस्थान सरकार का स्वायत्तशाषी संस्थान)

सुनेल रोड, झालरापाटन, झालावाड़, राजस्थान–326023

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Semester

Date:

ENGINEERING COLLEGE JHALAWAR REVALUATION/VIEW ANSWER COPY FORM B.TECH / MBA (FORM FILL ONLY IN CAPITAL LETTERS & Fill Separate form for each semester)

| B.TECH/MBA | BRANCH | |
|-----------------|--------|--|
| NAME OF STUDENT | | |
| FATHER NAME | | |
| ROLL NO. | | |
| YEAR | | |
| EMAIL ID | | |
| MOBILE NO. | | |
| AADHAR NO. | | |
| RECEIPT NO. | | |
| RECEIPT AMOUNT | | |
| RECEIPT DATE | | |
| ABC-ID | | |

NAME OF SUBJECT DETAILS

| S.No | Sub.Code | NAME OF THEORY SUBJECT | |
|------|----------|------------------------|--|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |

If form filled by other person (With authorization letter)

| Name | Mob. No. | |
|------------|---------------|--|
| College Id | Aadhar Id. | |

I hereby declare that the entries made by me in the Application Form are complete and true to the best of my knowledge, belief and information. I hereby declare that I shall be solely responsible for providing any wrong information. (Enclose photo copy of College Id/ Semester marksheet/Fees receipt/Aadhar card)

STUDENT SIGNATURE