Officer I/C



GOVERNMENT POLYTECHNIC, MUMBAI

(An Autonomous Institute of Government of Maharashtra)

49, Kherwadi, Ali Yawar Jung Marg, Bandra (East), Mumbai-400051

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FORM FOR VERIFICATION OF MARKS

(Applicable to only Theory Head of the Courses)

Name of the Student	: Surname		First Name			Middle Name		
Enrollment No.	:		Diplom	oma Programme:				
Term End Examinati	ion :	ODD / EVEN	N 20					
To, The Principal, Govt. Polytechnic, Mumbai				Office Use only				
				Verification Fees + Form Fee Paid Rs.				
				Receipt No. : Date :				
Sir, I would like to apply for re-totaling of the marks under theory heads of the following courses.				Signature of Cashier				
(Attach Photocopy	of Current	: Marksheet/(Gazette))				
Course Code								
Course Name								
Marks out of 60	/60	/60	/6	0	/60	/60	/60	
Place : Date :	F 000	e l	25	6. T 7	•6•	Signature o	of Student	
Course Code	For Off	fice use only ((Marks	after Vo	erification,) 		
Section I								
Section II								
Total Remarks (Change / No Change								
Signature of Verifier								
Signature of								