

## **MOUNTAIN TOP UNIVERSITY**

## REQUEST FOR AMENDMENT OF RESULT

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COLLEGE				DEPARTMENT						PROGRAMME				
6/N Matric. No.	Name of Student	Semester	Session	Course Code	Name of Internal Examiner	Former Score			New Score			Reason for Change in	Remark by BCOS	
						CA	Exam	Total	CA	Exam	Total	Score		
1	1	1	1	1					I				1	
Name of Chief Examiner			Signature						Date					
			••			•••••	•••		•	•••••	 Date			
	Matric. No.	Matric. Name of No. Student	Matric. Name of Semester Student	Matric. Name of Semester Session  No. Student  Name of Chief Examiner	Matric. Name of Semester Session Course Code    Matric. No.   Student   Semester   Session   Course Code	Matric. Name of Student Session Course Internal Examiner  No. Student Semester Session Course Internal Examiner  Name of Code Internal Examiner  Signature	Matric. Name of Semester Session Course Internal Examiner CA  No. Student Code Internal Examiner Signature  Name of Chief Examiner Signature	Matric. Name of Semester Session Course Internal Examiner CA Exam  No. Student Semester Session Code Internal Examiner Student	Matric. Name of Semester Session Course Internal Examiner CA Exam Total  Name of Chief Examiner  DEPARTMENT	Matric. Name of Semester Session Course Name of Internal Examiner CA Exam Total CA  No. Student Semester Session Code Internal Examiner CA Exam Total CA  Semester Session Course Name of Internal Examiner CA Exam Total CA  Signature Signature	Matric. Name of Student Semester Session Course Code Internal Examiner CA Exam Total CA Exam    CA   Exam   Total   CA   Exam	Matric.   Name of   Semester   Session   Course   Internal   Examiner     CA   Exam   Total   CA   Exam	Matric.   Name of Student   Semester   Session   Course   Name of Internal Examiner     Former Score   New Score   Reason for Change in Score   CA   Exam   Total   CA   Exam   Total	