



OFFICE OF THE ADDITIONAL CONTROLLER OF EXAMINATIONS
(UNIVERSITY DEPARTMENTS)
ANNA UNIVERSITY : CHENNAI 600 025

DCOE OFFICE: CEG / MIT / ACT / SAP CAMPUSES
END SEMESTER EXAMINATIONS APRIL / MAY 201 9
FORMS TO BE FILLED FOR MALPRACTICE CASES

1. Name of the Candidate :
2. Register No. :
3. Department :
4. Semester (presently studying) :
5. Full Time / Part Time :
6. Date of Examination :
7. Subject Code / Title of Exam writing (the date in which he/ she is indulged in malpractice) :
8. Incriminating materials possessed :
9. Materials written on : Calculator, Geometry Box / Scale / Other :
10. Exchange of Answer Paper / Question paper :
11. Body Language :
12. Approximate time of copying :
13. Possessing of Cell Phones / Programmable Calculator :

Student's Signature :
with date :

Signature of HS,
Student is must. &
should address on
why the student has
attempted for
malpractice.

Hall Superintendent / Invigilator

Addl. Superintendent

To,
DCOE – CEG / MIT / ACT / SAP Campuses

Sir, herewith I have enclosed the answer paper and material possessed by the student who has indulged in malpractice during examination for necessary action please.

Chief Superintendent

Forwarded to ACOE (UD) for further action please

**Deputy Controller of Examinations
CEG / MIT / ACT / S AP Campuses**

*Copy of the same is available in <http://acoe.annauniv.edu/download.php>