



ANNA UNIVERSITY, CHENNAI – 600 025

Office of the Additional Controller of Examinations (University Departments)

APPLICATION FOR PHOTOCOPY OF ANSWER SCRIPT - Session – AUGUST - 2018

<b>Campus (Tick✓)</b>	<b>C.E.G</b>	<b>A.C TECH</b>	<b>M.I.T</b>	<b>S.A.P</b>	Application Number / Ack. No.	
					(for office use only)	
Name in Block Letters					Mobil No.	
Roll Number					<b>Regulation</b>	
Program Tick ✓	<b>B.E / B.Tech / B.Arch</b>	<b>M.E / M.Tech</b>	<b>M.Sc / M.C.A /M.B.A</b>	<b>M.Arch / M.Plan / M.Phil</b>	<b>M.S (By Research)</b>	<b>Ph.D</b>
Branch /Specialization						
Mode (Tick ✓)	Full time			Part Time		
<b>DETAILS OF PHOTOCOPY APPLIED</b>						
<b>Sl. No</b>	<b>Sem No</b>	<b>Subject Code</b>	<b>Subject Title</b>			<b>Regular / Arrear</b>
<b>Details of Fee payment: ( Enclose the original challan - ACOE copy )</b> <b>List the subject's semester wise.</b>						
<b>Challan Date</b>			<b>Bank Details</b>			<b>Amount (Rs)</b>

\* Photocopy: Rs. 300 /- per answer script

Date:

Signature of the student

For office use

Suptd .,

DCOE

ACOE(UDs)

**CANARA BANK**  
**Anna University Branch, Chennai-600 025.**  
**( Remitter's Copy )**

Student's Fee A/c.No. : **8456101113485**  
 Campuses : **CEG / MIT / ACT / SAP**

Name of Student :

Roll No. :

Degree / Branch :

Semester :

S.No.	Fee Particulars	Amount	
		Rs.	P.
1.	Examination Fee		
2.	Revaluation Fee		
3.	Fine		
4.	Others (Specify)		
	Total		

(Rupees .....only)

**Date :** **Signature of Remitter**

Received the above sum of Rs. ..../- (in words)  
 Rupees.....

**Date & Seal of the Bank** **Manager/Acct**

**CANARA BANK**  
**Anna University Branch, Chennai-600 025.**  
**(ACOE's Copy)**

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