

SZABIST – Islamabad Campus

Scrutiny Form for Final Exam

Not applicable for Final Projects and Research Studies

Student Name:	Reg #
Program:	Semester : <i>Fall</i> <i>Spring</i> <i>Summer</i>
Section :	Year: 20.....

Course Name <i>(Final Paper)</i>	Instructor's Name	Class & Section

Re-Counting Amount Rs.1000/- Per Paper

Re-Assessment/Re Checking Amount Rs.5000/- Per Paper

Finance Office

Student Signature

Remarks	
Signature	

This Form will not be accepted after the submission deadline by Examinations

FOR OFFICE USE ONLY

Re-Counting Result Same Changed

New Marks after changing: _____ New Grade: _____

Re-Assessment Result Same Changed

New Marks after changing: _____ New Grade: _____

Findings in case of re-assessment from HoD's / P.M's

Refunded of Amount in case of changes

_____ _____ _____ _____

P.M. HOD Examination Controller Head of Campus

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* *Finance Office* >>>> *Examination Office* >>>> *Admissions (Student Personal file).*