



CENTRAL UNIVERSITY OF RAJASTHAN, BANDARSINDRI- 305817

(Established Under the Central Universities Act, 2009)

APPLICATION FOR GRADE IMPROVEMENT

1. Name of Candidate: _____

2. Enrolment No. : _____ Year of Admission _____ Semester _____

3. Date of Declaration of Result: _____ (attach semester result)

4. Address: _____

5. Contact Number: _____

6. Particulars of payment: Rs. 750/- per course

Transaction Number/ Receipt No _____

Date of Issue _____

7. Details of courses for which grade improvement is being applied for:

(Not more than two courses per semester or four courses in one academic year)

S.NO.	Course Code	Course Title	Grade Secured
1			
2			
3			
4			

Note: - Permitted only if the student has cleared all courses of a particular semester in which he/she intends to take an improvement examination.

I hereby admit that I have read the rules of Grade Improvement and agree to accept/abide by the revised improvement result which would be declared by CURAJ in response to my application.

Date: _____

Signature of Candidate

FORWARDED

Signature of HoD/forwarding authority

With official seal

Signature of Dean

With official seal