COMSATS Institute of Information Technology
Lahore Campus

MAKE-UP EXAMS Request Form

To be filled by the Student (Please fill all fields having * and attach required documents):

Exams Type: □ 1st Sessionals □ 2nd Sessionals □ Midterm  
Semester: □ Fall-20__ □ Spring-20__

*Registration No.: __________________________  *Name: __________________________

*Degree Program/Batch: __________________________  *Department: __________________________

*Course Title: __________________________  *Resource Persons/Teacher Name: __________________________

*Reason for apply: __________________________

1. Please attach original paid challan receipt (Rs. 2000/- Per Course for Undergraduate Programs and Rs. 3000/- Per Course for Graduate Programs) after getting the approval of concerned HoD/Incharge.

2. This form can only be used for make up examination of 01 course only, attach separate form if you want to apply for more than 01 course.

3. Also attach the evidentiary documents like Medical Certificate in case of illness or Marriage Ceremony Card in case of marriage of your brother/sister.

*Date: _______________  *Student’s Signature: __________________________

HOD/Incharge’s Approval

*Department: __________________________  *HoD/Incharge Name: __________________________

Either request for make-up exams is □ Approved  or  □ Not Approved  (Please tick with √)

Remarks (if any): __________________________

Date: _______________  Signature: __________________________

To be filled by the Resource Person

Kindly fill the following fields if student’s request is approved by the head/Incharge of the academic department;

Exams Date: _______________  Exams Time: _______________  Exams Place: __________________________

Remarks (if any): __________________________

[Please note make up exams should be conducted within 10 days from the conduction of regular exams]

Date: _______________  Resource Person Name: __________________________  Resource Person Sign: __________________________

Note for DCO

This request form should be submitted to examinations department along with the following documents;

□ Award list  □ Attendance Sheet  □ Sealed envelope of solved answer books  □ Copy of Question Paper
□ Original fee receipt of Rs. 2000/- Per Course for Undergraduate Programs and Rs. 3000/- Per Course for Graduate Programs

For Examinations Office Only

Control No: _______________  Received by (Name & Signature): __________________________  Date: _______________

Previous Status on Attendance Sheet: _______________  Obtained/Total Marks: _______________

Marks Uploaded on System by (Name & Signature): __________________________  Date: _______________