



APPLICATION FOR RE-MARK OF EXAMINATION SCRIPT
JUNE / SEPTEMBER / NOVEMBER _____

BELLVILLE CAMPUS

(Complete a separate form for each subject)

- NB:**
1. Application fee is R300 per subject.
 2. All details, as requested, must be furnished by the candidate.
 3. Examination scripts will only be marked within the 1st week of commencement of the new semester.
 4. Hand this form in at the **FACULTY OFFICE** after payment.

(Please print and indicate with a (√) where required)

STUDENT NUMBER						
COURSE						
TITLE	MR		MS		OTHER	
SURNAME						
FULL NAMES						
POSTAL ADDRESS						
	POSTAL CODE					
TELEPHONE NUMBER						

SUBJECT TO BE RE-MARKED		
SUBJECT CODE		
RESULT (As shown on Advice of Results)		
FINAL MARK _____	ADJUSTED FINAL MARK _____	RESULT CODE _____

SIGNATURE OF APPLICANT

DATE

FOR OFFICE USE ONLY				
APPROVAL (Signature)				
RECEIPT NO		DATE		AMOUNT
				R300,00