

St.Aloysius College, Elthuruth  
Application Form for Internal Re-examination

1. Name of the Candidate: .....

2. Department: .....

3. Class and Reg.No. ....

4. Name of the Papers:  
.....  
.....  
.....

5. Reason/ Justification for Addl. Chance:  
.....

Date:

(Name & Signature of the Applicant)

HOD

Paper in Charge

Principal