

**COCHIN UNIVERSITY OF SCIENCE AND TECHNOLOGY
APPLICATION FOR GRACE MARKS 20.... – 20...**

1. College/Department/School:.....

2. Category: : ARTS / SPORTS / NSS / NCC

3. Name of Student (IN CAPITAL LETTERS) :

4. Semester/Class/Course :

5. Examination Reg. No. and semester for :
which the Grace mark to be awarded

6. Programmes/Events Participated (Add three highest achievements during the semester)*

Sl.No.	Event	Level and period of the event	Position	% of Grace Marks
(i)				
(ii)				
(iii)				

Signature of the Student with date

7. CERTIFICATE FROM HEAD OF THE DEPARTMENT/INSTITUTION

Certified that the above details were verified with office documents and found correct.

Date:

Seal

Signature, Name and Designation of Head of the
Department/Institution

FOR OFFICE USE ONLY

Highest achievement/programme for which grace mark is recommended:

Sl.No.	Details of the event/Programme	Position	% of Grace Marks
1.			

Recommended/Not Recommended[†]

(Office Seal)

* Attested copies of the merit certificate and hall ticket should be attached with the form.

[†] Hon. Treasurer, Cochin University Union (For Arts/Cultural Events), Assistant Director, Dept. of Physical Education (For Sports), Programme Co-ordinator, NSS (For NSS).

