

TO the DEAN of...... FACULTY (EXAM OBJECTION PETITION)

		/
I am	. year student name	d, number
I kindly req	uest you to re-evalu	nate the
exam paper	held on//	······
Full Name		
Signature	•	
Mobil	•	
E-mail		
		//20
		/20
The exam pa	pers of the student	whose information is written above have been evaluated by the
		Faculty
	low for your inform	
☐ Error of Fact		☐ No Error of Fact
		GRADE DETAILS
Current Exam Grade		
New Exam Grade		
Statement		
		Full Name / Signature
		APPROVAL
	• • •	

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Dean