**STATE BOARD OF TECHNICAL EDUCATION & TRAINING , ANDHRA PRADESH :: HYDERABAD**

APPLICATION FORM FOR RE-COUNTING FOR VALUED ANSWER SCRIPTS

1. Name :_____

2. Hall Ticker No: | | | | | | | |

3. Exam.Centre:_____

4. Subject /Paper _____ Shorthand L/I/H Type Lower/Higher

5. Demand Draft Particulars. Rs.100/-

D.D.No._____ Date_____
Bank_____Date_____

Encl: Self addressed

1. Envelope
2. Demand Draft.

Signature of the Candidate

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For Office use only

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Verified & the report is

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Asst., Supdt., A.S.,

Address:_____
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Pin :

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**STATE BOARD OF TECHNICAL EDUCATION AND TRAINING ANDHRA PRADESH:: HYDERABAD**

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Sir/Madam,

Ref:- Re-counting of marks

With reference to your application for recounting of marks in the Type/Shorthand Examinations. You are informed that:

1. The marks awarded are correct.

2. After Re-counting, it is observed that you scored_____marks instead of_____marks.

Asst./Dy.Secretary
(Tech. Examinations).

*NM*