



OFFICE OF CONTROLLER OF EXAMINATIONS

Examination Resource Utilization Form

(For Theory / Practical / Lab / Online Exams)

School	
Department	
Exam Cell Coordinator & Designation	
Date of Submission of Form	
Contact No.	
Semester	<input type="checkbox"/> ODD <input type="checkbox"/> EVEN
Exam Type	<input type="checkbox"/> Theory <input type="checkbox"/> Practical <input type="checkbox"/> Online <input type="checkbox"/> Others: _____
Date of Exam (If known)	

Resource Utilization Details

S.No.	Item/ Resource Issued	Quantity Issued	Quantity Utilized	Balance/ Returned	Remarks/Us age Details

Confirmation & Declaration

I hereby declare that the above-mentioned resources have been utilized exclusively for the intended examination purposes, and the remaining items, if any, have been returned to the OCoE office.

Verified and Submitted by Exam Cell Coordinator: Signature: _____

HoD Approval : ☐ Verified & Accepted ☐ Discrepancy Noticed | **Signature:** _____

Dean Approval : ☐ Verified & Accepted ☐ Not Verified | **Signature:** _____

OFFICE USE

Received By (Name & Signature)	Date of Return Submission	Verified Stock Balance	Remarks

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