

**GENERAL LEGAL COUNCIL  
INDEPENDENT EXAMINATIONS BOARD**

**REQUEST FOR RE-TALLYING OF MARKS FORM**

INDEX NO	TITLE OF SUBJECT	DATE OF EXAM	DATE OF REQUEST

REASON(S) FOR SEEKING RE-TALLYING OF MARKS:

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FULL NAME OF CANDIDATE: .....

SIGNATURE OF CANDIDATE: .....

DATE: .....

FOR OFFICE USE ONLY

AMOUNT PAID – GHS PER SCRIPT	DATE PAID

GHANA SCHOOL OF LAW STAMP

GHANA SCHOOL OF LAW  
P. O. BOX GP 179  
ACCRA