



## ACADEMIC & EXAMINATION CELL

### REGISTRATION FORM

Date: \_\_\_\_\_

1. Name of the Student : \_\_\_\_\_

2. Roll No. : \_\_\_\_\_

3. Name of the Programme : B.E./B.Tech.( \_\_\_\_\_ )

4. Semester: VII 5. Mobile No.: \_\_\_\_\_ 6. Email ID: \_\_\_\_\_

#### 7. Details of Annual Tuition Fee: (Attach Proofs for Payment)

a) Status of Tuition Fee Payment : \_\_\_\_\_

b) Date of Fee Payment for the A.Y.2023-24: \_\_\_\_\_

c) Mode of Payment : \_\_\_\_\_

d) Receipt No. with date : \_\_\_\_\_

#### 8. Details of Subjects registering for VII–Semester:

| S. No. | Course Code | Name of the Course | Core/Programme Elective / Open Elective /Project/Seminar | Pursuing through Institute /MOOCs | Remarks |
|--------|-------------|--------------------|----------------------------------------------------------|-----------------------------------|---------|
|        |             |                    |                                                          |                                   |         |
|        |             |                    |                                                          |                                   |         |
|        |             |                    |                                                          |                                   |         |
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|        |             |                    |                                                          |                                   |         |
|        |             |                    |                                                          |                                   |         |
|        |             |                    |                                                          |                                   |         |
|        |             |                    |                                                          |                                   |         |

Note: *Registration is not permitted with any fee due.*

Signature of the Student

Remarks of Head of the Department:

Fee Due, if any: \_\_\_\_\_

Signature of the HOD

DIRECTOR – AEC & COE

PRINCIPAL