Name of Students. (Please write in Capital letters).

Father’s Name. (Please write in Capital letters).

Mother’s Name. (Please write in Capital letters).

ID:…………………; PROGRAMME ……………………………………………………………ACADEMIC YEAR…………............; SEMESTER………………; Batch:..………

Phone No……………………………………….

Type of Course | Course Code | Course Title/Title Dissertation /Thesis | Credit
---|---|---|---
Core

Elective

General

Instructions for Filling up The Course Registration Card

1. Write only alphabet or one digit in each Box
2. Please use only one row for each course.
3. Course Code, Course No., Course Title and Credits should be filled up as per the approved Curriculum of the Academic Program for the current Academic year.
4. The Student should register for the Course(s) in which they have failed/ they wish to improve their Grades (Maximum Two Courses) in the earlier Semester. Indicate such courses in the Remarks column: Make up Exam/ Grade improvement Exam

Signature of Student
Date:

Signature(with Seal): I/C School/ Department