

SANT LONGOWAL INSTITUTE OF ENGINEERING AND TECHNOLOGY LONGOWAL

(ESTABLISHED BY: GOVT OF INDIA)
DEEMED TO BE UNIVERSITY

REGISTRATION FORM FOR UG/PG COURSES

SEMESTER (ODD/EVEN) _____ ACADEMIC YEAR _____

Total Number of Credits earned in 1st & 2nd Semester : _____
(Minimum 25 credits are required in 1st & 2nd Semester for registration to 3rd semester onwards)

NAME OF THE STUDENT : _____
 FATHER'S NAME : _____
 MOTHER'S NAME : _____
 PROGRAMME (UG/PG) : _____
 BRANCH : _____
 REGISTRATION No. : _____
 STUDENT'S MOBILE NUMBER : _____ Email _____
 FATHER/MOTHER'S MOBILE NUMBER : _____ Email _____

Have you ever been disqualified : Yes/ No. If Yes, give details _____

| a) Detail of courses for which registering in regular semester (core subjects) | | | |
|--|----------|---------------|--------|
| S. No. | Sub Code | Subject Title | Credit |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| Sub Total | | | |

| b) Detail of courses for which registering in regular semester (Elective/Open Elective subjects) | | | |
|--|----------|---------------|--------|
| S. No. | Sub Code | Subject Title | Credit |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| Sub Total | | | |
| c) Detail of courses of previous semesters to be repeated | | | |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| Sub Total | | | |
| d) Detail of courses of regular semesters to be dropped | | | |
| 1 | | | |
| 2 | | | |
| Sub Total | | | |

Total No. of Credits for which registering (a+b+c-d) : _____
(Total credits should not exceed 36)

I have gone through the rules and checked my eligibility for the registration of the above subjects. I hereby declare that the Information provided is true and correct. I shall be responsible for the consequences (if any).

DATED : _____

SIGNATURE OF THE STUDENT

RECOMMENDATION

CLASS COUNSELLOR