COLLEGE OF ENGINEERING, KARUNAGAPPALLY

Application for Semester Registration

Admission No :		Name:				
Branch :		Semester:		Category: (Category: (SC/OEC/GENERAL)	
Class and Number last studied:						
Semes	ter to which registration is sou	ught:				
Local Address			Permanent Address			
Phone No. (Student):			Phone No. (Parent):			
l ded belief. declare	clare that the particulars furnish I also confirm that, I am aware of that I shall attend all classes reg	of the rules an	true and cor	rect to the best o in force and shall all academic activ	obey them. I further	
		DUES CLEA	ARANCE	*		
Sl.No.	Name of the Section	Staff in ch	arge	Remarks	Signature	
1	Office (Students should produce proof of fee paid through SBI COLLECT along with this application)		1			
2	Library					
3	РТА			*		
4	Hostel (LH)/(BH)					
5	College Bus					
6	Senate/Sports					
7						
8						
9	Staff Advisor					
Head of the Department		Recommended / Not Recommended				

Promotion granted/Not granted:

Date: