COLLEGE OF ENGINEERING, KARUNAGAPPALLY

Application for Semester Registration

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Admission No :		Name:	Name:				
Branch:		Semester:		Category: (SC/OEC/GENERAL)			
Class and Number last studied:							
Semester to which registration is sought:							
Local Address			Permanent Address				
Phone No. (Student) :			Phone No. (Parent):				
, , , ,					my knowledge and		
I declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I also confirm that, I am aware of the rules and regulations in force and shall obey them. I further							
declare that I shall attend all classes regularly and shall take part in all academic activities.							
Date:							
Signature of the Student							
DUES CLEARANCE							
Sl.No.	Name of the Section	Staff in charge		R	emarks	Signature	
	Office (Students should						
1	produce proof of fee paid						
	through SBI COLLECT along with this application)						
2	Library						
3	РТА						
4	Hostel (LH)/(BH)						
5	College Bus						
6	Senate/Sports						
7	Training & Placement						
8							
9	Staff Advisor						
Head of the Department		Recommended / Not Recommended					

Promotion granted/Not granted: Date: