

Father's Name

National Institute of Technology Hamirpur (H.P.)

Registration Form (Academic Year 2020-21)

Name of Hostel: K&H Roll No.: 195008 Registration Semester Number: Room Number: E- 312 Name of the COMPUTER SCIENCE & ENGINEERING Department **Programme** B. Tech. Name: Mr/Ms AVISHRANT SHARMA (in English) नामः श्री / सुश्री (हिंदी में) DR. RAJESH SHARMA

Address for Correspondence (in CAPITAL Letters)	Permanent Address (in CAPITAL Letters)			
HOUSE NO 418, GOUT. POLYTECHNIC	V.P.O. DHARAMSAL MAHANTAN			
HAMIRPUR. HP	TEH. AMB, DISTT. UNA, HP			
PIN Code: 177001 Mobile: 8219078738	PIN Code: 177110 Mobile: 9418672006			
Email: AVISHRANTS @ GMAIL. COM				

SNo	Course Code	Details of the Courses (Registered During Current Semester) Course Name	L	T	P/D	Credits
1.	MA-203	ENGG. MATHEMATICS	3	١	0	4
2.	CS - 211	OBJECT ORIENTED PROGRAMMING	3	١	0	4
3.	CS - 212	MICROPROCESSOR AND INTERFACING	3	٥	0	3
4.	CS - 213	DISCRETE STRUCTURES	3	١	0	4
5.	EC - 211	DIGITAL ELECTRONICS AND LOGIC DESIGN	3	1	0	4
6.	CS - 214	OBJECT ORIENTED PROGRAMMING LAB	O	0	2	l
7.	CS - 215	MICROPROCESSOR AND INTERFACING LAB	0	0	2	1
8.	FC - 214	5 0 100 100 0 100 1100		0	2	1
9.						
10.						
Total Hours = 25					22	

Signature of the Student

Signature of Registration Incharge

(Concerned Department)

Note

- It will be sole responsibility of the student to fill the information legibly and correctly. For any discrepancy, the concerned student shall be responsible.
- The Departmental Registration Incharge shall verify the Course Codes and Names.

Result of Previous Semester					
Previous	SGPI	CGPI	Course(s) With F Grade, if any		
Semester Number			Course Code	Course Name	
	9.62	9.81			
	*Grade in Semester Progress Seminar (in terms of S & X)	'Total Credits Earned Through Thesis Work	'Applicable to PhD	Student only	

Student Declaration

I hereby declare that the information furnished by me in this Registration Form is true and correct. I have not concealed any information. However, if any information furnished herein is incorrect or incomplete, I understand that I am liable to appropriate action and I also agree to forego my registration.

Date: 27 08 2020

Signature of the Student

Semester Registration Fee Details (attach Proof of Payment)				
Amount: ₹ 68150	Date of Payment: 21 / 08 /2020	SBI Collect Transaction Number: DUD 4186850		

Undertaking for Payment/Clearance of Dues

I undertake to pay/clear the Dues, if any, found outstanding against my name at Library, Hostel, Accounts and any other Department/Section, as per the directions/notification of the authorities.

Signature of the Student

For Office Use of Concerned Department

The Registration of the Student is confirmed

Registration Incharge

Convener, DBPC/DMPC/DDPC (as applicable)

HoD