

## (RE-REGISTRATION FORM)

Re-Registration for Semester 6  
Enrollment No A21704820028  
Name MR NACHIKET PUSHKARNA  
Program BCA  
Batch 2020-2023  
Date of Birth 02/05/2002  
E-Mail ID amitynachiket31@gmail.com  
Contact Address C-179, GYAN MARG, TILAK NAGAR  
JAIPUR(Rajasthan)  
Pin code 302004  
Phone 9521755049  
Mobile 9521755049  
Fax NA  
Father's Name VIKAS PUSHKARNA  
C-179, GYAN MARG, TILAK NAGAR

Parmanent Address  
JAIPUR(Rajasthan)  
Pin code 302004  
Phone 9521755049  
Fax NA

**Place of stay during this Semester (Non-Hostellers)**

Address

City

Pin

Telephone

Mobile

E-mail

Hobby Club N/A

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Date of payment of fees and fee receipt number : \_\_\_\_\_

Are You staying in hostel \_\_\_\_\_ If Yes, Room

No. \_\_\_\_\_

Are you having any evaluation pending for the previous semester

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If yes, mention the course(s) and reasons for it \_\_\_\_\_

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I understand that my registration for the Semester mentioned above is provisional and it will stand cancelled in case I do not fulfill the requirements for promotion to the same as per the academic regulation.I also certify that I do not have any payment of dues and I have met all academic deadlines till now

Date : \_\_\_\_\_

(Signature of the Student)

((Name & Signature of the Verifying Faculty))