

## भारतीय प्रौद्योगिकी संस्थान गुवाहाटी

## Indian Institute of Technology Guwahati Guwahati - 781 039

## COURSE REGISTRATION FORM (NCC / NSO / COS / SA101 / SA102 / SA201 / SA202)

PROGRAM: BTech/BDes

Signature of the Faculty In-charge

Date: .....

Session: ..... First name/ Middle name/ Last name (in **CAPITAL LETTERS** only) Name Roll No. **Department** Hostel Room No. **IITG Email Alternative Email** Present home address for communication Phone Fax Email Address of the local quardian Phone Fax Email SI. No. Course No. **Course Name Declaration:** I hereby declare that I am registering to the said course and continue this course. I also understand that this course is compulsory for non-credit courses and if I do not complete this course, my name shall be display in back loggers list automatically. Signature of the student Signature of the Coordinator Date: ..... Date: .....