

(RE-REGISTRATION FORM)

Re-Registration for Semester 3
Enrollment No A20405220102
Name MR ARPIT AGARWAL
Program B.Tech (CSE)
Batch 2020-2024
Date of Birth 11/03/2002
E-Mail ID arpitaga11@gmail.com
Contact Address PLOT -27 FLAT-S2 ,GANGOTRI APARTMENT ,SANTOSH NAGAR GOPALPURA BYPASS JAIPUR
JAIPUR(Rajasthan)
Pin code 302019
Phone 8290629890
Mobile 8290629890
Fax NA
Father's Name SUBODH JAITWAL
PLOT -27 FLAT-S2 ,GANGOTRI APARTMENT ,SANTOSH NAGAR GOPALPURA BYPASS JAIPUR
Parmanent Address JAIPUR(Rajasthan)
Pin code 302019
Phone 8290629890
Fax NA
Place of stay during this Semester (Non-Hostellers)
Address
City
Pin
Telephone
Mobile
E-mail
Hobby Club N/A

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

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

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))