

Dr B R AMBEDKAR NATIONAL INSTITUTE OF TECHNOLOGY**G T Road Bye Pass, Jalandhar-144011(Punjab) India****Registration form for Additional courses along with regular lower semester students****(This form shall be submitted in Academic Section by the last date of Registration)**

Name: _____ Roll No _____

Branch _____ Semester _____

A. Total registered credits during regular semester: _____

B. Detail of courses to be registered as additional courses along with regular lower semester students.

S.No	Course Code	Course Title	Semester	L	T	P	Credits	Sign of Course Coordinator*
1								
2								
3								
4								

- Course coordinator is requested to note the details of student for classes.

Total credits at A and B (should not exceed 30) _____

I hereby declare that I shall manage the classes/Examinations, if any, due to registration for additional courses. I shall not hold the institute responsible for shortage of attendance/ missing of any of the examination due to clashes of additional and regular semester courses.

Signature of Student

Signature of HOD

The above information is verified please.

Deputy Registrar (Academics)

Dean (Academic)

Fee		

Amount _____	Signature _____	Date _____

Registration fee @ 1500/- per course has been deposited.