## (CHANGE IN COURSE REGISTRATION)



## **CENTRAL UNIVERSITY OF SOUTH BIHAR**

(To be filled in triplicate and to be produced with a copy of previously filled course registration card)

Change in Course Registration Card under CBCS

	[Registered for Course(s) in	(Odd/Even) Semester of A	mester of Academic Year]				
Name	of the Student (in Capital Letters):						
Progra	mme:Semester: Batch:	Department:	School	ol:			
Enroll	ment No.: Se	ex: (M/F) Category: (Gen/OBC/S	C/ST/PH) Father	's Name:			
Mob.	E-Mail:						
Certif  1.  2.	ed that I have/am:  Not registered for pursing any other full-time  Cleared all dues.	DECLARATION  programme of study in this Universi	ity or in any other Univ	versity/Institution.			
3.	Paid the current semester fee of Rs	vide receipt No	dated	(Copy to be attached).			
4.	Not studied/earned credits from the same cou	urse(s) for which I am registering in	this semester.				
5.	Read the relevant provisions/instructions very in the course Registration Card.	ry carefully and solely responsible for	or the accuracy of the	information furnished by me			
Date:				Student's Signature			

## PARTICULARS OF COURSE (S) FOR CHANGE IN REGISTRATION

(Changes in Courses is permitted ensuring to earn minimum 20 credits and maximum 32 credits subject to respective degree ordinance)

SI. No.	Course Code	Course Title	Credits	Type of Course (Core/ Elective / Self Study)			Mentor's Signature with name and remarks, if any				
Addition of Course(s)											
Deletion of Course(s)											
					· ,		Τ				
For Office Use											
Date of Submission by the Student Total Credits registered for											
Checked by (Name & Signature) on date											