UNIVERSITY OF ENGINEERING & TECHNOLOGY MARDAN

Re-Registration Form for Fall Semester 2019

Department: _____

Instructions:

- This form is to be filled by the student who intends to register courses in Fall semester 2019.
- The form has to be submitted at the **Department** office. Late submission will not be entertained.
- Courses with only F, W, D, D+, C, C-, and C+ grades can be re-registered/improved.
- Students will be responsible for any misinformation provided in this form.
- Regular Students can re-register for a maximum of **04 credit hours**.

Name: _____ S/D of _____ Registration # _____

CGPA: _____ (Out of 4.00) Mobile No: _____ Email: _____

Present Address: _____

Details of course(s) to be registered:

S#	Course Code	Course title	Credit Hrs.	Pervious grade
	Total Credit Hours			

Latest transcript is attached: Yes   [   ]   No   [   ]
Fee Payment receipt is attached: Yes   [   ]   No   [   ]

I declare that I have read and understood the instructions above and that all the information provided by me in this form is correct to the best of my knowledge.

Student's Signature: _____   Date: _____

Verification by Account Section

The student has cleared all his/her outstanding dues.

Certified by Accounts Section: Name of Officer: _____ Signature & Stamp_____

Department Use Only

The form has been checked & verified.

Name of **Batch Advisor**: _____   Signature & date: _____

Countersigned by **Semester Coordinator**: _____ Date: _____

The form has been received & archived, & the data has been uploaded to CMS server.

CMS Operator signature: _____ Date: _____