

# S. B. JAIN INSTITUTE OF TECHNOLOGY, MANAGEMENT & RESEARCH

(An Autonomous Institute, Affiliated to RTMNU, Nagpur)

Approved by AICTE, Accredited By NAAC A Grade, Near Jain International School, Katol Road, Nagpur-441501 Phone No. 0712-2667777 Fax. 0172-2667666 Website: www.sbjit.edu.in Email: info@sbjit.edu.in

### **ReSit Examination Registration Form**

**EXAMINATION: END SEMESTER ReSit Examination EVEN Sem-II-S-21** 

PROGRAMME : B.Tech. Second-Semester – Group-II

BRANCH :



| NAME            | (First Name) | (Middle Name) | (Last Name) | GENDER                   |  |
|-----------------|--------------|---------------|-------------|--------------------------|--|
| MOTHER'S NAME   |              |               |             | DATE OF BIRTH            |  |
| PARENT PHONE NO |              |               |             | STUDENT PHONE NO         |  |
| STUDENT MAIL_ID |              |               |             | UNIVERSITY ENROLLMENT NO |  |
| REGISTRATION NO |              |               |             | SECTION                  |  |
| SEMESTER        |              |               |             |                          |  |

# CORRESONDANCE ADDRESS:

#### **COURSES IN WHICH STUDENT WANT TO APPEAR - For ReSit Examination:**

| Select | S.No | Course Code | Course Title               | Credit |
|--------|------|-------------|----------------------------|--------|
|        | 1    | BSC104T     | Engineering Mathematics-II | 4      |
|        | 2    | BSC102T     | Engineering Physics        | 4      |
|        | 3    | BSC102P     | Engineering Physics Lab    | 1      |
|        | 4    | ESC101T     | Electrical Engineering     | 4      |
|        | 5    | ESC101P     | Electrical Engineering Lab | 1      |
|        | 6    | ESC102P     | Workshop Practices         | 2      |
|        | 7    | ESC103T     | Engineering Mechanics      | 4      |

**Select** ( $\sqrt{\ }$ ) For which student want to registered for ReSit Examination.

## **UNDERTAKING**

I, the undersigned is a student of S. B. Jain Institute of Technology, Management & Research, Nagpur hereby agree to abide by rules of the institute. I am fully aware that I must attend the classes with minimum 75% attendance in each course, only then I shall become eligible to appear for the ESE / Resit of respective course.

| Date:  | Signature of Student                              |
|--|---|
| CERTIFICATE FROM TH  | IE HEAD OF DEPARTMENT                             |
| Certified that the above entries made by the stude him/her for the said Examination. | nt are verified and found correct which qualifies |
| Signature of Verifier  | Signature of the Head of<br>Department(With Seal) |
| FOR OFFI   | CE USE ONLY                                       |
| Exam. Fee Rs   |   |
| Late fee if any Rs   |   |
| otal Rs.   |   |
| Accepted / Rejected  |   |
|  | Checked & approved by                             |
|  |   |