

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

(An Autonomous Institute, Affiliated to R.T.M.N.U, Nagpur) OFFICE OF CONTROLLER OF EXAMINATIONS

E-01

EXAMINATION REGISTRATION FORM

Ac	ademic Ye	ear: 2021 -2	2			Affix Pass	sport
			ESE/Re-Sit /Impro	ovement Summe	er/Winter-20	Size Photo of Candio To be atte	late
Re	gular Stude	ent/ Ex-Stud	lent			by HoD/Fa	
Pro	ogramme-	UG: B.Tec	h	PG: M.Te	ech (EN)/ M.B.A.		
Ser	nester		-				
1.	Student 1	Registratio	n No.:				
2.	Name (In	block letter	s):				
			(First Name)	(Father's Name)) (Surname)		
3.	Mother's	Name:	4. I	Date of Birth:			
5.	Correspo	ndence Ado	dress with pin co	de:			
6. Mobile No: (Parent)			((Student)			
7.	Universit	y Enrolmer	1t No				
8	Courses	in which th	e candidate want	t to annear:-			
			d be specified sepa				
	Sr. No.	Course Code		se Name	Theory/Practical	Credit	
	01						
	02						
	03						
	04						
	05						
	06						
	07						
	08						
	09						
	10						

9. Details of previous examination taken by the candidate:

(A copy of Grade Card is to be attached)

	Examination	Total Credit	Result	SGPA
		Earned	(Successful/ Unsuccessful)	
I Sem				
II Sem				
III Sem				
IV Sem				
V Sem				
VI Sem				
VII Sem				

UNDERTAKING

I, the undersigned is a student of S. B. Jain Institute of Technology, Management & Research, Nagpur hereby agree to abide by the academic rules and regulations of this institute. I am fully aware that I must have an overall 75% attendance of the total number of classes including lectures/ tutorials and practicals for appearing in the End Semester Examination.

Date: Signature of Student

CERTIFICATE FROM THE HEAD OF DEPARTMENT

Certified that the above entries made by the student wherever applicable, are verified and are found correct which qualifies his/her admission to the Examination.

Signature of Verifier

Signature of the Head of Department (With Seal)

FOR OFFICE USE ONLY

Examination Fee	
Late fee (if any)	
Total (Rs)	

Accepted / Rejected

Checked by