



PROFORMA FOR REGISTERING IN THE OPEN ELECTIVES-EVEN SEMESTER

Academic Year : 2018-2019; Semester:

Name of the Student :

Roll No :

Name of the Programme studying:.....

Year of study/Group/Batch:.....

Choice of Open electives for the year 2018-19

Sl. No.	Choice of Open Elective	Offering Department
1		
2		
3		
4		
5		

Signature of the Student

Signature and seal of the HoD

FOR OFFICE USE ONLY

Registered Open elective	Course Code	Department	Signature of the Course teacher

Dean, Academic