



ఆంధ్ర ప్రదేశ్ కేంద్రీయ విశ్వవిద్యాలయం
CENTRAL UNIVERSITY OF ANDHRA PRADESH
ANANTHAPURAMU, ANDHRA PRADESH-515701

Semester Registration Form

1) Name of the Student :

2) Student Registration No :

3) Name of the Programme :

Tick(✓) UG PG

4) Year of Admission :

5) APAAR ID :

6) Semester for which registration is sought:

7) Fees Paid (Please enclose proof of payment of fees):

UTR No:

8) Email id:

9) Mobile Number:

10) Courses for which registered:

| Sl. No | Semester | Course Code | Title of the Course | CC/AEC/IDE/MDC/SEC/VAC/ Major/Minor/Elective/Swayam/ Audit course etc., | Credits | Regular/ Redo Course |
|--------|----------|-------------|---------------------|---|---------|-------------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |

11) Details of Backlogs:

| Sl. No | Semester | Course Code | Title of the Course | Year & Month of Examination | Credits |
|--------|----------|-------------|---------------------|-----------------------------|---------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |

Date:

Signature of the Student

Forwarding Remarks:

Date:

HoD/ Dean

Note: The eligible students are required to submit the Registration form duly signed by the Head/Dean of the concerned School/ Department, to the office of CoE.

-----For office use only-----

D/A Academics

Controller of Examinations