

## आन्ध्र प्रदेश केंद्रीय विश्वविद्यालय မဝ(ငှုံ့పဲ့ထိန် ဒီဝ(င်္ဂို့ သိန္္သီ့သို့တွေ့ ပော်

## CENTRAL UNIVERSITY OF ANDHRA PRADESH

## **ANANTHAPURAMU, ANDHRA PRADESH-515701**

1) Name of the Student :	Semester Registration Form								
3) Name of the Programme:	1) Name of the Student :								
4) Year of Admission :	2) Student Registration No:								
5) APAAR ID 6) Semester for which registration is sought: 7) Fees Paid (Please enclose proof of payment of fees): 8) Email id: 9) Mobile Number: 10) Courses for which registered: 11. No Semester Code Title of the Course Code Audit course etc., 12. Audit course etc., 13. No Semester Code Title of the Course Major/Minor/Elective/Swayam/ Credits Audit course etc., 14. Audit course etc., 15. No Semester Code Title of the Course Personal Course etc., 16. Audit course etc., 17. Audit course etc., 18. Audit course etc., 19. Audit course etc., 19. Audit course etc., 10. Audit course etc., 10. Audit course etc., 10. Audit course etc., 10. Audit course etc., 11. Audit course etc., 11. Audit course etc., 12. Audit course etc., 13. Audit course etc., 14. Audit course etc., 15. Audit course etc., 16. Audit course etc., 17. Audit course etc., 18. Audit course etc., 19. Audit course etc., 19. Audit course etc., 10. Audit	3) Name of the Programme :					Tick(✓)[UG PG]			
6) Semester for which registration is sought: 7) Fees Paid (Please enclose proof of payment of fees): 8) Email id: 9) Mobile Number: 10) Courses for which registered: 11. No Semester Code Title of the Course Major/Minor/Elective/Swayam/ Credits Audit course etc., 1	4) Year of Admission :								
7) Fees Paid (Please enclose proof of payment of fees): UTR No:  8) Email id: 9) Mobile Number:  10) Courses for which registered:  11. No Semester	5) APAAR ID :								
8) Email id: 9) Mobile Number: 10) Courses for which registered: 31. No Semester	6) Semester for which registration is sought:								
9) Mobile Number: 10) Courses for which registered: 31. No Semester Code Title of the Course CAEC/IDE/MDC/SEC/VAC/ Major/Minor/Elective/Swayan/ Credits Audit course etc  1	7) Fe	es Paid (I	Please er	nclose prod	of of payment of fees):	UTR No:			
10) Courses for which registered:    Si. No   Semester   Course   Code   Title of the Course   Co/AEC/IDE/MDC/SEC/VAC/ Major/Minor/Elective/Swayam/ Credits   Regular/ Redo Course									
Si. No Semester Code Title of the Course Code CC/AEC/IDE/MDC/SEC/VAC/ Major/Minor/Elective/Swayam/ Redo Course    Code Code Code Code Code Code Code Code									
All No Semester Code Code Title of the Course Major/Minor/Elective/Swayan/ Credits Regular/ Redo Course Audit course etc., Regular/ Redo Course 1									
1	Sl. No	Semester			Title of the Course	Major/Minor/Elective/Swayam			
3	1					riddit codisc etc.,			
4	2								
Signature of the Student School/ Department, to the office of CoE.   Signature of the concerned School/ Department, to the office of CoE.   Signature   Signatur	3								
6	4								
7	5								
8									
9									
10 Details of Backlogs:  SI. No Semester Code Title of the Course Year & Month of Examination Credits  1	-								
11) Details of Backlogs:  SI. No Semester Code Title of the Course Year & Month of Examination Credits  1									
Sl. No Semester Code Title of the Course Year & Month of Examination Credits  1		Details of	Racklog	٠.٠					
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.	SI No Samester Course Title of the Course Vear & Month of Evamination Credits								
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.			Code						
3									
Date:  Signature of the Student Forwarding Remarks:  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.									
Date: 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.									
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.	5								
<b>Note</b> : 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.									
School/ Department, to the office of CoE.	Date: HoD/ Dean								
	Note:	School/ I	Departme	ent, to the of	fice of CoE.				

**D/A Academics** 

**Controller of Examinations**