Jaypee University of Information Technology, Waknaghat, Solan

FORM : REQUEST FOR ONE TO ONE COURSE

1. Name of Student :
2. Roll No and Batch :
3. Department :

		Recommendation for Registration			
S.No.	Course Code	Course Name	Credit	Batch (L/T/P)	Faculty
1.					
2.					
3.					
4.					
5.					
6.					
	Total Add Credits				

Faculty Coordinator / HoD Recommendation

I have gone through the record / transcript of the student and recommended course(s) are as per the approved course curriculum and the said course(s) is/are not repeated.

(Faculty Coordinator)   (HoD)

(Chairperson Time Table Committee): [To ensure clash of the course, if any, before putting signature]

Dean (A & R)

Forwarded to AR (Acad.)   University Division
(Subject Regn Dealing Hand)