

Dr. B. R. AMBEDKAR POLYTECHNIC COLLEGE, GWALIOR - 474009
STUDENT REGISTRATION FORM

Roll No. Branch Current Sem.
 Name Gender
 (In Block Capital Letters)
 Father's Name
 Permanent Address
 Local Address Mobile
 Fee Details: Receipt No. Date Amount

Paste Photo & Sign Below

Result of Previous Examinations:

SEM	PASSED SUB. CODE	CARRIED OVER SUB. CODE
I.		
II.		
III.		
IV.		
V.		
VI.		

Courses in which student has to register for the (Month) (Year)examination.

A. Regular Subjects:

S. No.	SUB. CODE	NAME OF SUBJECT	TH	PR
1				
2				
3				
4				
5				
6				

B. Carried Over Subjects:

S. No.	SUB. CODE	NAME OF SUBJECT	TH	PR
1				
2				
3				
4				
5				
6				
7				
8				

Date

(Signature of Candidate)