

KIRODIMAL INSTITUTE OF TECHNOLOGY, RAIGARH (C.G)

SEMESTER REGISTRATION FORM (Regular/Provisional)

Session 20 -

SEMESTER :- BRANCH :-

Full Name of the Student :-.....

ENROLLMENT No. :-.....

Roll No :-

--	--	--	--	--	--	--	--	--	--	--	--	--

Recent self
attested
Passport size
photograph

Category :-..... Income(Annual) :-.....

Father's Name :-..... Mobile No :-.....

Mother's Name :-.....

Date of Birth :-.....

Permanent Full Address :-.....

Local Full Address :-.....

Mobile No :-..... Email ID :-.....

Aadhar Card No. :-.....

Bank Name :-..... Branch Name :-.....

A/c No. :-..... IFSC Code :-.....

1st Year Admission Year :-.....

Fee details-(Attach Self Attested photocopies of previous all fee-receipt)

S .No.	Semester	Fee Amount	Challan No./ Date Or DD No./ Date	Receipt. No/ Date
1	1			
	2			
2	3			
	4			
3	5			
	6			
4	7			
	8			

Signature of Applicant

Date

Note :- All Entries are compulsory filled by the student and it should be Checked by Admission Section Positively.

P.T.O.

Academic Details (Attach Self Attested Photocopies of Previous Semester Mark Sheet)

S.No.	Semester	Month/Year	Result	Signature of I/C exam. (whether eligible for admission or not)	Signature of Scholarship I/C (If Scholarship form already send to the Govt. then write down the Bill no/date and S. no.)	Signature Of Account Section (Kindly mention the amount of fee which is to be collected from Student)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1						Rs. -----
2						
3						
4					Entitlement of Yearly Reimbursement Amount of Tuition Fees and Sign of I/C Scholarship	Sign -----
5					Rs. -----	Note – If Amount of Fee wrongly Calculated by Account Section then the balance amount will be recovered from the account section
6					Sign -----	
7						

Library Dues	Sign of I/C Library with Date

Signature of Applicant
Date :-.....

For Admission Section

Checked . & Verified by
I/C Admission
Date-.....

Note :- In the absence of I/C Admission the Assistant can be signed the registration form which is subject to counter Signed by I/C Admission .

For Account Section

D.D. NO :-.....
Amount :-.....
Vide Receipt No :-.....
Date :-.....

Accountant

Note :- Cash Amount will be not Received By Account Section.

For Office Use Only
Provisionally Permitted/Not Permitted

PRINCIPAL

- Note:-**
1. Only Prescribed fee along with the late fee shall be received by account section.
 2. Part Payment is not Allowed .
 3. Without Duly filed registration form the fee will not be accepted by the account section.
 4. Cash payment is not allowed.