



**SANT LONGOWAL INSTITUTE OF ENGINEERING AND TECHNOLOGY**  
**LONGOWAL, DISTT. SANGRUR(PUNJAB)**  
**(DEEMED TO BE UNIVERSITY U/S 3 OF UGC ACT 1956)**

**STUDENT APPLICATION FORM FOR ATTENDING SUMMER COURSE**

1. NAME OF THE STUDENT : \_\_\_\_\_
2. REGISTRATION NO. : \_\_\_\_\_
3. SEMESTER : \_\_\_\_\_ SESSION: \_\_\_\_\_
4. E-mail Id: \_\_\_\_\_ CONTACT NO.: \_\_\_\_\_

DETAIL OF COURSES WANT TO ATTEND DURING THE SUMMER (MAXIMUM THREE):

S.NO	SUBJECT CODE	SUBJECT NAME	CREDITS

I have gone through the rules & regulations of summer course and checked my eligibility for the same. My candidature can be cancelled if I found ineligible at any stage. I shall be responsible for the consequences if any.

SIGNATURE OF THE STUDENT

\_\_\_\_\_

Recommendations of course counselor/Head of Department

\_\_\_\_\_

Received Rs \_\_\_\_\_ towards fee for attending summer term course vide receipt  
No. \_\_\_\_\_ Dated \_\_\_\_\_ @ Rs.6000/- per summer course.

Cashier

\_\_\_\_\_

**ADMIT CARD**

1. NAME OF THE STUDENT : \_\_\_\_\_
2. REGISTRATION NO. : \_\_\_\_\_
3. SEMESTER : \_\_\_\_\_
4. SESSION : \_\_\_\_\_

DETAIL OF COURSES WANT TO ATTEND DURING THE SUMMER:

S.NO.	SUBJECT CODE	SUBJECT NAME

AFFIX  
PHOTOGRAPH

Attested by  
Class Counselor

SIGNATURE OF STUDENT

DEALING OFFICIAL/ASSTT/SUPDT

D.R. (ACADEMICS)