



**SANT LONGOWAL INSTITUTE OF ENGINEERING AND TECHNOLOGY, LONGOWAL**

(Deemed University under MHRD, Govt. of India)

**REGISTRATION FORM FOR SUPPLEMENTARY/ RETEST EXAMINATION OF SEMESTER \_\_\_\_\_**

Month and Year of Exam: \_\_\_\_\_

**NOTE:** Fill the form in CAPITAL LETTERS only. Incomplete forms will be rejected. Use separate forms for separate semesters.

NAME OF THE STUDENT : \_\_\_\_\_  
FATHER'S NAME : \_\_\_\_\_  
REGISTRATION NUMBER : \_\_\_\_\_  
ROLL NUMBER : \_\_\_\_\_  
TRADE : \_\_\_\_\_  
MOBILE NUMBER : \_\_\_\_\_ E-MAIL ID: \_\_\_\_\_

Affix here recent passport size photograph duly attested by H.O.D./Class Counselor

I hereby exercise my option for appearing in the supplementary examination of following subjects:

Sr. No.	SUBJECT CODE	SUBJECT NAME	Present Grade (For ICD/UG/PG)	SIGN. OF CONCERNED TEACHER
1.				
2.				
2.				
4.				
5.				

I solemnly declare that the above information is true and correct to the best of my knowledge and I shall be responsible for the consequences (if any).

(SIGNATURE OF THE STUDENT)

The student fulfils the conditions of supplementary/retests examination and may be allowed to appear for the same.

(SIGNATURE OF CLASS COUNSELOR WITH DATE)

**For office use only (Account Section)**

Received retest examination fee of Rs. \_\_\_\_\_ vide Receipt no. \_\_\_\_\_ Dated \_\_\_\_\_

Signature of Cashier/dealing hand with stamp

**For office use only (Academic Section)**

The above particulars are verified from the record hence submitted for approval to appear in supplementary/retest examination.

Dealing Hand

(Recommended/Not recommended)

Assistant/Superintendent

(Approved)

Assistant Registrar

DEALING HAND- for making entry in the cut-list and placing the original application in personal file of the student.

**ADMIT CARD**

(Admit card is compulsory to appear for supplementary/retest examination)

SEMESTER : \_\_\_\_\_ Month and Year of Examination: \_\_\_\_\_

NAME OF THE STUDENT : \_\_\_\_\_ REGISTRATION NUMBER: \_\_\_\_\_

TRADE : \_\_\_\_\_ ROLL NUMBER : \_\_\_\_\_

The student is allowed to appear for supplementary examination of following subjects:

Sr. No.	SUBJECT CODE	SUBJECT NAME
1.		
2.		
2.		
4.		
5.		

Affix here recent passport size photograph duly attested by H.O.D./Class Counselor

\_\_\_\_\_

(Signature of Students)

Assistant Registrar (Academics)