



MANIPUR TECHNICAL UNIVERSITY, IMPHAL

www.mtu.ac.in

STUDENT RE-REGISTRATION REQUEST FORM

FORM NO. :

Date :

1. STUDENT'S DETAILS

Name (in CAPITAL) :		
Registration No. :	Programme :	<input type="checkbox"/> B. Tech <input type="checkbox"/> MBA
Branch :	Year :	Current Semester :
Status : <input type="checkbox"/> Regular <input type="checkbox"/> Detained (If Detained, mention Semester in which he/she is detained) :		

2. RE-REGISTRATION REQUEST FOR ATTENDING CLASSES

Only Theory Only Practical Both Theory and Practical

3. CLEARANCE FROM

a) Department of

Is the request Verified : Yes No

Is the request : Approved Rejected

Remarks (if any) :

Signature of HoD :

b) Exam Cell

Is the request Verified : Yes No

Is the request : Approved Rejected

Remarks (if any) :

Signature of ACE :

c) ITS Cell

Is the request Verified : Yes No

Is the request : Approved Rejected

Updated Record : Yes No

Remarks (if any) :

Signature of ITS Cell Staff :

d) Admission Section

Is the request Verified : Yes No

Is the request : Approved Rejected

Remarks (if any) :

Signature of Staff :

COURSE CODE	COURSE NAME	APPLICABLE FEE (₹)	T/P
			<input type="checkbox"/> T <input type="checkbox"/> P
			<input type="checkbox"/> T <input type="checkbox"/> P
			<input type="checkbox"/> T <input type="checkbox"/> P
			<input type="checkbox"/> T <input type="checkbox"/> P
			<input type="checkbox"/> T <input type="checkbox"/> P
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			<input type="checkbox"/> T <input type="checkbox"/> P
			<input type="checkbox"/> T <input type="checkbox"/> P
TOTAL (FEES PAYABLE) :			

* T - Theory ; P - Practical

Signature of Registrar/Asst. Registrar :