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MAHATMA GANDHI UNIVERSITY

The CBCSS Degree [PRIVATE REGISTRATION B.A/B.Com] Examinations:

Application for Registration to the COMBINED SEMESTER & March-April/May-June 20.....

[For the Supplementary and Improvement candidates]

***Permanent Register Number:**

1	Name of Candidate (CAPITAL LETTERS)	ENGLISH	
		MALAYALAM	
2	Name of CENTRE		
3	Name of Programme		B.A.: B.Com. :
4	Date of Birth/...../..... Age	Gender : Male / Female
5	Address for Communication with Phone Number. Email:		PIN CODE
6	Name & Designation of the Identifying Officer with Dated Signature on the Photograph		<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> Passport Size Photograph </div> <p style="text-align: right; margin-top: 10px;">Signature of the candidate (To be signed in the presence of Identification Officer)</p>

Applicable only to the candidates who registered for additional Degree/Addl. Elective

7	The college at which the candidate studied for the B.A/B.Com programme with Reg. No/PRN and period of study	College: Reg. No/PR Number: Period of study:								
8	Details of Previous Appearances	Semester with Reg No./PR Number <table style="display: inline-table; border: none;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: right;">MONTH & YEAR</td> </tr> <tr> <td>I & II</td> <td></td> </tr> <tr> <td>III & IV</td> <td></td> </tr> <tr> <td>V & VI</td> <td></td> </tr> </table>		MONTH & YEAR	I & II		III & IV		V & VI	
	MONTH & YEAR									
I & II										
III & IV										
V & VI										

[Select Programme ✓] **B.A/B.Com**

DETAILS OF COURSES [ie. subjects] APPEARING

SUBJECTS or COURSES	SEMESTER Papers OR Titles <input type="text"/>	SEMESTER Papers OR Titles <input type="text"/>
1. Common Course I English	1) 2)	1) 2)
2. Common Course II Addl.Lang:		
3. Core Course	1) 2) 3) 4) 5) 6)	1) 2) 3) 4) 5) 6)
4. Open Course		
5. Complementary Course	1) 2)	1) 2)
6. CHOICE BASED Core Course		
7. Addl. ELECTIVE Course for B.Com		
8. OPTIONAL Course		
9. Any Other Information		

Signature of the Candidate:

Place:

Date: