

NORTH EAST UNIVERSITY BANGLADESH COURSE REGISTRATION FORM

☐ Spring / ☑ Fall Semester 20 <u>24</u>

Name	of the Student:	Section	ection (If any):							
Regis	tration/ID No:	ster(s) Number <u>: 8t</u>								
Courses taken in current semester										
	Course Code	Course Title	Credits							
(i)	CSE-216	Engineering Drawings	2.00							
(ii)	CSE-402	Thesis/ Project II	2.00							
(iii)	CSE-404	Viva Voce	1.50							
(iv)	CSE-423	Computer Graphics	3.00							
(v)	CSE-424	Computer Graphics Lab	1.50							
(vi)	CSE-425	Cyber and Intellectual Property Law	3.00							
(vii)	CSE-459	Contemporary Course on Computer Science & Engineering	3.00							
(viii)	CSE-460	Lab onContemporary Course on Computer Science & Engineering	1.50							
(ix)										
(x)										
Regu	e:									

RETAKE / IMPROVEMENT

i)	Fail C	Fail Courses List:		(Completed by Course Advisor or Controller of Examinations Office)								
		Course Code		Course Code Course Code				Course Code				
	(i)		(iv)		(vii)		(x)					
	(ii)		(v)		(viii)		(xi)					
	(iii)		(vi)		(ix)		(xii)					
	Check	xed by the office of the CoB	E :									
7)	Retal	ke or Improvement Co	ourses	taken in current sem	ester.							
,		-	T					Credits	Pleas	se Tick		
		Course Code		Course Title					Fail	Improv ement		
	(i)											
	(ii)											
	(iii)											
	(iv)											
	(v)											
	(vi)											
	(vii)											
	(viii)											
***	Enrol	l lling a failed or Impr	rovem	ent course(s) will b	e trea	ted as Re-Take.						
3)	Re-Ta	ake credits taken:			9) To	tal credits (Regular+R	Retake]):				
_	aiver	filled by accounts of	ffice		Ţ	Total Payable for		ed by acco	ounts of	ffice		
	aiver %				ļ	current semester						
ne/s vill	she dro I result	udent confirms the cours op this specific semester, t in incurring all necess whenever student choos	r, he/she s sary fee	e must withdraw their re es, and all the register	egistrati	tion according to the pre	escribed	l process. F	Failure to	to do so		
					Fc	or Office	e lise					
_							1 01	, 030				
ign	iature (of the Student	- ;	Student Mobile No.								
	ırse Ad	lvisor		of the Department		Accounts Office	Accounts Office			Office		
)at	Oate:		Date:		,	Date:	ate:			Date:		

☆ Students are advised to taking approval from respective Course advisor and or Department Head & Submit it to the Controller of Examinations Office along with Payment slip.