# NORTH EAST UNIVERSITY BANGLADESH

## COURSE REGISTRATION FORM

☑ **Spring /** ☐ **Fall Semester 20 __25__**

Department: **CSE**      Program: **B.Sc. (Engg.) in CSE**

1) **Name of the Student:** _____ Section (If any): _____

2) **Registration/ID No:** _____ Semester(s) Number: **3rd**

3) **Courses taken in current semester**

| | Course Code | Course Title | Credits |
|---|---|---|---|
| (i) | CSE-06132111 | Object Oriented Programming Language | 3.00 |
| (ii) | CSE-06132112 | Object Oriented Programming Language Lab | 1.50 |
| (iii) | CSE-06132113 | Algorithm Design and Analysis | 3.00 |
| (iv) | CSE-06132114 | Algorithm Design and Analysis Lab | 1.50 |
| (v) | CSE-06132115 | Digital Logic Design | 3.00 |
| (vi) | CSE-06132116 | Digital Logic Design Lab | 1.50 |
| (vii) | STA-05422101 | Basic Statistics and Probability | 3.00 |
| (viii) | BUS-04112101 | Principles of Accounting | 3.00 |
| (ix) | | | |
| (x) | | | |

4) **Regular/Drop credits taken** __**19.5**__ 5) **Number of Non Credit Course:** _____

_____
**Signature of the Student**

_____
**Course Advisor/Head of the Dept.**

     **Please Turn Over**

# Retake / Improvement

**6)  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) | |
| *Checked by the office of the CoE :* | | | | | | | |

**7)  Retake or Improvement Courses taken in current semester.**

| | Course Code | Course Title | Credits | Please Tick Fail | Please Tick Improvement |
|---|---|---|---|---|---|
| (i) | | | | ☐ | ☐ |
| (ii) | | | | ☐ | ☐ |
| (iii) | | | | ☐ | ☐ |
| (iv) | | | | ☐ | ☐ |
| (v) | | | | ☐ | ☐ |
| (vi) | | | | ☐ | ☐ |
| (vii) | | | | ☐ | ☐ |
| (viii) | | | | ☐ | ☐ |

**\*\*\*Enrolling a failed or Improvement course(s) will be treated as Re-Take.**

**8)  Re-Take credits taken:** _____     **9) Total credits (Regular+Retake):** _____

| Waiver % | *filled by accounts office* |
|---|---|
| | |

| Total Payable for current semester | *filled by accounts office* |
|---|---|
| | |

☞ *If a student confirms the course registration in a semester but does not continue the classes or exams of all courses, i.e- if he/she drop this specific semester, he/she must withdraw their registration according to the prescribed process. **Failure to do so will result in incurring all necessary fees, and all the registered courses will be designated as retake courses in the next semester whenever student choose to take these courses.***

_____          _____

**Signature of the Student**                **Student Mobile No.**

| For Office Use | |
|---|---|
| | |
| Accounts Office  Date: | Exam Office  Date: |

_____          _____

**Course Advisor**                **Head of the Department**
**Date:**                **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.***