



INDIAN INSTITUTE OF TECHNOLOGY BHUBANESWAR
REGISTRATION CARD

Semester: _____

Session: Autumn/Spring

Date of Registration: _____

NAME OF THE SCHOOL: _____

Name :	
Roll No :	
Programme :	

Course Registration Details

Sl. No	Subject Code	Subject Name	L-T-P	Course Type [Technical (Subject)/ Mandatory/Interdisciplinary]	Credit	Name of the Subject Faculty
1						
2						
3						
4						
5						
			TOTAL			

Signature of Scholar

Signature of Supervisor(s)

Signature of Head of the School