

CHAITANYA BHARATHI INSTITUTE OF TECHNOLOGY (A)

Chaitanya Bharathi P.O., Kokapet (V), Gandipet (M), Hyderabad - 500 075, Telangana State Phone No: 040-24193280; Fax No: 040 – 24193278; Website: www.cbit.ac.in

ACADEMIC & EXAMINATION CELL

Application for Course Registration for Honors Degree

Academic Year: _____

				Date:	
1. N	ame of the S	Student :			
2. R	oll / Hall Tio	cket No. :			
3. Pr	ogramme	: B.E. / B.T	ech. (
4. Se	emester:	5. Year of .	Admission:		
6. M	obile No.: _	7. E	Email ID:		
8. D	etails of the	prescribed courses compl	eted related to the Honors Degr	ree:	
S. No.	Course Code	Name of the Course	Pursued through Institute NPTEL / MOOCs	Credit Earned	Remarks
			Total Credits Earned		
9. Pe	rmission rec	quest for registration of tl	ne following Courses, with detai	ls:	
S. No.	Course Code	Name of the Course	Pursuing through NPTEL / MOOCs	Credits	Remarks

SIGNATURE OF THE STUDENT