



**DEPARTMENT OF ELECTRICAL ENGINEERING**  
**FACULTY OF ENGINEERING & TECHNOLOGY**  
**GOMAL UNIVERSITY, D. I. KHAN, KPK, PAKISTAN**



**Registration Form**

Name: \_\_\_\_\_ Father Name: \_\_\_\_\_  
 Registration No: \_\_\_\_\_ Roll No: \_\_\_\_\_  
 Department: \_\_\_\_\_ Program: \_\_\_\_\_  
 Academic Year: \_\_\_\_\_ Session: \_\_\_\_\_  
 Semester: \_\_\_\_\_ Semester No: \_\_\_\_\_

**Detail of Courses to be Registered**

Course Code	Course Name	Credit Hours

**Detail of Courses(s) to be Re-registered**

Course Code	Course Name	Semester	Previous Grade

I hereby certify that particulars given above are correct. I promise to abide by the rules and regulations of the university/faculty.

**Dated:** \_\_\_\_\_ **Student's Signature:** \_\_\_\_\_

**Comments of Program Coordinator:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<p><b><u>For Office Use Only</u></b>          Received Rs: _____          Receipt No.: _____ Date: _____          Office Clerk: _____</p>	<p>_____</p> <p><b>HOD/Chairman</b></p>
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