



Application Form for Alternate Course
For MS / PhD Students
(To be Filled by Student)



Name: _____ Regn No / CMS ID: _____
Entry Year/Fall/Spring _____ Dept: _____
Name of Supervisor: _____

Ser	Name of Semester	Course Code	Course Name	GPA
1.	Fall Semester 20	a. b. c.		

CGPA: _____

Ser	Name of Semester	Course Code	Course Name	GPA	Alternate Course detail (if any)
2.	Spring Semester 20	a. b. c.			

CGPA: _____

Ser	Name of Semester	Course Code	Course Name	GPA	Alternate Course detail (if any)
3.	Fall Semester 20	a. b. c.			

CGPA: _____

4.	No of already repetitions availed: _____				
5.	Alternate course is for: Core <input type="checkbox"/> Elective <input type="checkbox"/>				
6.	Request for Alternate Course:-				
	S/No	Course Studied Previous with code	Name of Semester	Alternate Course with code	Remarks
	a.				
	b.				
c.					
7.	For PhD Students Only. Recommendation of GEC is required, get signature accordingly.				

Date: _____ 2020

Student's Signature: _____

Sig of Dept PG Coord: _____

DC Exam: _____

(PhD Student's Advisor)

Respective HoD Signature with Date