



## SUMMER COURSE REQUEST FORM

Department(s) of EE/CE&SE/GS&AS

Name: \_\_\_\_\_

Enrollment No: \_\_\_\_\_

Department: \_\_\_\_\_

Course Requested: \_\_\_\_\_

*One Course per form. If you intent to request for 2 courses please submit separate forms*

Phone No (Cell): \_\_\_\_\_

Phone No (Home): \_\_\_\_\_

Email: \_\_\_\_\_

### Undertaking

1. *I agree to pay a fine of Rs. 5000/- to the university if the course gets offered and I do not get registered for it.*
2. *The above information provided is correct.*
3. *Student ID Card's photo copy is attached.*

Note: A 3 contact hour course will have 8 hours per week classes since it will be a 6 week session.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_