



NWFP University of Engineering & Technology, Peshawar

Course Registration Form

Date _____ Account No _____

Academic Year _____ Semester (Fall/Spring/Summer) _____

Department _____ Campus _____ Registration Number: _____

Name: _____ Father's Name _____

Present Address/Phone _____

Registration for semester number (1st/2nd, ----): _____ Number of semesters completed: _____ CGPA: _____

No. of courses taken to date: _____ No. of courses passed: _____

No. of courses failed (F): _____ No. of courses withdrawn (W): _____

Registration of New Courses

Course Number	Course Title	Credit Hours	Pre-requisites*
Total Credit Hours of New Courses			

*Semester coordinator shall guide the students

Re-registration of Courses (F/D/D+/W grades)

Course Number	Course Title	Credit Hours	Previous Grade
Total Credit Hours of Re-registered Courses**			

**Total credit hours of re-registered course shall not exceed 4 in fall and spring semesters and 9 in summer semester.

Grand Total of Credit Hours: _____

Student's Signature _____

Semester Coordinator*** _____

Chairman*** _____

Controller of Exam: _____

***Note: Please, ensure that student has attached the latest transcript.