

ETERNAL UNIVERSITY REGISTRATION CARD													
College		Academic year:		Name:			Class:			Class semester:			
		Semester (odd/even):		Registration No:					Latest OCPA:				
S.No	Course code	Course title	Credits			M	T	W	Th	F	S	Withdrawn/ add/ Rept	Teacher Signature
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
		Total											
Date of Registration		(Signature) Student		Class teacher/ Advisor		Account office		Dean		Controller of examination		Registrar	

*Four cards to be filled