ACADEMIC OFFICE
NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI – 620 015

COURSE WORK REGISTRATION FORM [M.S. (by Research) / Ph.D.]

Name (in Capital letters)	
Roll No.	
Type of Registration	**Full Time** (Institute Scholarship(HTRA) / Other Fellowship (QIP / ICCR / JRF / CSIR / DST / DAE / NBHM / etc.) / Project / Non Stipendiary) **Part Time** Internal(staff) / External (Industry with R&D) / External-On Campus **Others** (Specify)
Date of Registration	
Department	
Name of the Guide	
Month and Year of Examination	

Sl. No	Course Code	Name of the Course	No. of Credits	Name of the Faculty offering the Course	Signature of the faculty

Signature of the Scholar

Signature of the Guide

Date: Head of the Department
(After getting signature from HOD, the photocopy(xerox) of this form may be given to Dept HOD office and then candidate can register the courses in MIS, once courses are uploaded by HOD office. The hardcopy of MIS course registration form and Form 4 (this form) with signature may be sent to PhD section)