ACADEMIC OFFICE



NATIONAL INSTITUTE OF TECHNOLOGY

TIRUCHIRAPPALLI - 620 015, TAMILNADU, INDIA

Phone: 0431-250 3013, 3910 Email: deanap@nitt.edu, ugacad@nitt.edu,ugacad2@nitt.edu

Date:04.05.2022

Ref: SE-January 2022 Session

CIRCULAR

Sub: Supplementary Examination for 1st Year UG courses – January 2022 Session – Reg.

Supplementary Examination for 1st Year UG students are scheduled from **19/05/2022 to 31/05/2022**. Current students who have failed (F) / absent (X) in the regular assessment held in the previous session (July 2021 semester) are eligible to appear for the Supplementary examination. The supplementary examination will be in ONLINE mode.

(a) Registration Procedure

- (i) Login to MIS and complete the online registration between 09.05.2022 and 10.05.2022.
- (ii) Take the screenshots of registration confirmation of individual courses
- (iii) Remit the required fees in the State Bank of India, through SB-collect.
- (iv) Fill the attached Personal information form.
- (v) Merge the (i) Registration confirmation screenshots, (ii) SB-collect fees receipt (iii) Personal information form as a single file and send to examfees@nitt.edu on or before 11.05.2022, 11 pm.

Mail should be sent ONLY from the student's NITT webmail ID. Supplementary registration request will not be processed without online registration in MIS.

(b) Faculty allotment

- (i) The consolidated list of students will be sent to the concerned department after the verification by the academic office.
- (ii) Faculty allotment will be done by the Heads of the respective Departments and the same will be informed to the students on 16.05.2022. The students are instructed to contact the faculty concerned for completing the assessments in time. The contact details of faculty are given in the link: https://www.nitt.edu/home/academics/departments/faculty/.
- (c) Weightage and minimum passing mark for Supplementary Examinations are as per the Institute rules and regulations.

(d) Fees Particulars

Particulars	Fees (Rs.)		
Examination Fee per course	500		
Mark Sheet	30		

Associate Dean Academic UG - II

To

The Director for kind information All Head of Departments with a request to circulate among all faculty First Year Professor in-charge



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REASSESSMENT/SUPPLEMENTARY EXAMINATION FORM

PERSONAL INFORMATION:

1.	Name	:	
2.	Roll no	:	
3.	Department	:	
4.	Specialization (For PG)		
5.	Batch	:	
6.	Contact Number	:	

LIST OF COURSES REGISTERED IN MIS

S. No.	Code	Theory Course name	Semester	Fees	SBi collect Fee Receipt No.
1.					
2.					
3.					
4.					
5.					
6.					
7.					

S. No.	Code	Laboratory Name	Semester	Fees	SBi collect Fee Receipt No
1.					
2.					
3.					
4.					

TOTAL FEES PAID: Rs	
(Rupees	

DATE:

SIGNATURE OF THE STUDENT