

University of Management and Technology

Registration Form

Program:		Semester: Fall / Summer / Sp	oring Year: 2 0	
Total Credit Hours of	completed:	CGPA:		
Email:		Cell No.:		
Course(s) to be f	Registered			· · · · · · · · · · · · · · · · · · ·
Sr No Course Code	Cr Hrs	Course Title	Pre requisite, if any	Section
1.				
2.				
3.				
4.				
5.				
6.				
Total:				
Participants ar themselves re		•		
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