

## REGISTRATION FOR EXAMS (FOR FOREIGN STUDENTS)

REGIST	RATION N	JMBER:				
NAME:						
COURS	E OF STUD	Y/SEM	IESTER:			
Course of study	subject- No.	Po- Version	Subject name		EXAMINER	P/W/Z
(Date)			(Signature)			

Please fill in this form and return it to the secretary of your course of study.