

MALOUT INSTITUTE OF MANAGEMENT & INFORMATION TECHNOLOGY, MALOUT

(An Autonomous Institute Established by Government of Punjab)

Phone No.01637-504311-13, Fax:01637-264511

REGISTRATION FORM(Revised)

Branch (**BBA,BCA,B.Com, M.sc**)(Pls.mentioned branch) : _____

Batch : _____

Semester : _____

Branch Roll No. : _____

University Registration No. : _____

Library Membership No. : _____

Name : _____

Father's Name : _____

Date of Birth : _____

Permanent Address : _____

Correspondence Address : _____

Phone No. (With STD Code & Mob.) : _____

Student : _____

Parents : _____

E-mail id : _____

Caste Category : _____

(Gen/SC/ST/OBC/Other)

Have you filled the regular examination form

In the previous semester(Yes/No) : _____

Have you Avail any Scholarship in the Institute (Yes/No)

if Yes pls tick: (MIMIT Scholarship/PMS/Other) : _____

Have you been detained in the previous semester,

If yes, then mention the name of subjects : _____

Signature of Student

Department Incharge

Verified that all the registration formalities have been completed and the Fee to be charged from the student is Rs. _____

(Concerned official, Academic Cell)

Verified that fee has been charged as per fee structure of the institute. Details are as follows.

Fee received Rs. _____ by DD No./Cash _____

Institute's Receipt No. : _____ Date : _____

Cashier

Accountant

Dean, Academics

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NO DUE SLIP

Date _____

Name of the Student

Branch & Semester (Previous)

Branch Roll No.

University Registration No.

Library Membership No.

Hostel (Boys/Girls) Room No.

1. Library

2. Boys Hostel

3. Girls Hostel

4. Sports

**Dean
Academics**