**SOUTH EASTERN UNIVERSITY OF SRI LANKA**

**FACULTY OF MANAGEMENT & COMMERCE**

**Medium**

**English**

**Tamil**

**SUBJECT REGISTRATION**

Name with initial :

**SEU / IS / / /**

Registration No :

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course** |  | **1st Year** | **2nd Year** | **3rd year** | **4th Year** |
|  |
| **BBA** |  |  |  |  |  |  |
| **B.Com** |  |  |  |  |  |  |
| **B.Sc. in MIT** |  |  |  |  |  |  |

Course

BBA (Specialization in) if any: …………………………………………………………………….

Academic Year & Semester : , Semester I / II

Permanent Address :

Contact No. : Residence: Mobile:

District : Sex:

**SUBJECTS TO BE OFFERED FOR THE SEMESTER**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S/No.** | **Subject Code** | **Subject Title** | **Signature of Lecturer** | **Signature of the Head** |
| 01 |  |  |  |  |
| 02 |  |  |  |  |
| 03 |  |  |  |  |
| 04 |  |  |  |  |
| 05 |  |  |  |  |
| 06 |  |  |  |  |
| 07 |  |  |  |  |

Date:

 Signature of the Student

Recommendation of the Dean:

Date:

 Signature of the Dean

**(FOR OFFICE USE ONLY)**

Remarks:

Assistant Registrar

Faculty of Management & Commerce

 Deputy Registrar

 Examination