MANGALORE

1. Name of the Student (in Block Letters):



UNIVERSITY

Signature Chairperson/Coordinator/Principal

APPLICATION FOR THE OPEN ELECTIVE COURSE IN THE THIRD SEMESTER POST- GRADUATE PROGRAMME 2025-26

Note: Read the Instructions (given as a separate file) carefully before filling the Application.

2.	Register Number:											
3.	Subject of PG Programme:											
4.	Name of the Department/Institution:											
5.	Email ID:											
6.	Mobile No.:											
7.	Codes for the Open Elective Course: (Insert five digit codes according to your preference by referring to the list of codes given in website).											
	Preference	1	2	3	4	5	6	7	8	9	10	
	Code of the Open Elective Course											
(TI ver	gnature of the his application rification, if an Particulars of	form is filled y)	by the stude						stitution	for further		
	Register	Total marks considered for admission, excluding entrance test marks (if conducted)					Total marks obtained in degree including languages (for all three years)					
	Number	Marks Obtained	Out of		Percenta		Marks Obtained	Out of		Percentage		