

## Visvesvaraya Technological University

(State University Government of Karnataka Established as per VTU Act 1994)

"JNANA SANGAMA", BELAGAVI - 590 018,

KARNATAKA STATE

Annx -III

## APPLICATION FOR READMISSION FOR B.E. /B.TECH./ B.ARCH./B.Plan

(Single application for Shortage of Attendance/ Rejection of results/ Temporary Discontinuation/ Readmission to I semester with revised USN (if not gained eligibility to join III semester after three years from date of first admission))

**PART I: STUDENT APPLICATION** 

(for III semester)

1.	Name of the Student	:	
2.	University Seat Number	:	
3.	Name of the College	:	•
4.	Branch	:	
5.	Readmission Category a) Shortage of Attendance	:	Yes / No
•	b) Temporary Discontinuation	:	Yes / No
	c) Rejection of Results	:	Yes / No
6	Readmitting to	:	Semester
7.	Applied for readmission during the academic year with scheme	:	Scheme
8	Details of Scheme studied	:	III semester: <b>Refer</b> VTU/BGM/Aca-OS/Cirs/ 2022-23/3575 dt: 13-10-2022 (Annx –I)
9	Additional subjects to be studied		III Semester: Refer VTU/Aca-OS-Cirs/2022-23/2324 dt: 25-07-2022 (Annx -II)
10.	Payment of Prescribed Fee	:	To be paid through online payment (Refer- <u>www.vtu.ac.in/online-fee</u> )
	d) Fee Shortage of 5,000 Attendance/ Rejection of results/ Temporary Discontinuation/ Others fees as notified e) Transaction ID	: :	

- 11 Required Documents to be Enclosed
  - 1. Fee receipt (as per 9 above)
  - 2. Copy of list of Candidates detained due to shortage of attendance sent by the Registrar(Eval.) duly signed by the Principal **OR** Permission letter for temporary discontinuation issued by Principal/ University (put √ mark on applicable)
  - 3. Not eligible to apply under rejection of results, if readmitted once under rejection of results.

I know the VTU regulations with respect to B.E./B.TECH./ B.ARCH./B.Plan. This readmission does not entitle me for any special provision. On my own wish and will I am applying for readmission.

I declare that the information given by me is true to the best of my knowledge and belief. The University may cancel the same, if found incorrect at any time .

Date of Application to the College:

Place:

Signature of Parent/ Guardian (With name & Relation to the student)

Signature of Student

## PART II: VERIFICATION BY THE PRINCIPAL OF THE COLLEGE AND SUBMISSION TO THE UNIVERSITY WITH REQUEST FOR THE NECESSARY ACTION

٦	This is to certify that the above information is checked and found correct, I request you to kindly give		
ŗ	permission to readmit the above candidate as a repea	ater to semester years for the	
ā	academic year		
	Encl: Date forwarded to the University:	Signature of Principal and seal	
	PART III : FOR UNIVERSITY OFFICE USE ONLY		
1	Permitted	Not permitted	
(	Case Worker:	Office Suptd:	
9	Special Officer:		
	Office Superintendent :	Registrar:	