

DR.VITHALRAO VIKHE PATIL FOUNDATION'S COLLEGE OF AGRICULTURE

Viladghat, PO.MIDC, Ahmednagar 414111(MS) Affiliated to , Mahatma Phule Krishi Vidyapeeth, Rahuri (MS)



ROSTER FORM

Academic Year :		Office Copy
Semester :	II (New)	Counselor's Copy
Duration :	/ / 20 to / / 20	Student Copy
Registration No. :		Mobile No.
Adhar No. :		

Name of the Student _

(In Block Letters) (S

(Surname)

(First Name)

(Father's Name)

Sr.	Course	Title of the Course	Credits			Whether	Sign of
No.	No.		Theory	Practical	Total	Offered	Course Teacher
A) Core Course					Yes/No		
1	AGRO 123	Fundamentals of Agronomy	1	1	2		
2	BOT 121	OT 121 Fundamentals of Crop Physiology		1	2		
3	ECON 121 Fundamentals of Agricultural Economics		2	0	2		
4	ENGG 121	Soil and Water Conservation Engineering	1	1	2		
5	ENTO 121	Fundamentals of Entomology	1	1	2		
6	EXTN 122	Fundamentals of Agricultural Extension Education	2	1	3		
7	GPB 121	Fundamentals of Genetics	2	1	3		
8	PATH 121	Fundamentals of Plant Pathology	2	1	3		
Total Core Courses			12	7	19		
B) Non-Gradial course							
9	FRST 121	Introduction to Forestry	1	1	2		
10	EDNT 121	Educational Tour	0	1	1		
Sub total			1	2	3		
C) Common Course							
11	EXTN 123	Communication Skills and personality	1	1	2		
		Developments					
Sub total			1	1	2		
Total Credits (A+B+C)			14	10	24		

For the use of Counselor

1. The course as above for which student has applied for registration have been verified and found to be correct. 2. It is recommended that he / she may be allowed to register for **Second** semester of 20 / 20

Signature of Counselor & Date

The student is allow		led in by Chief Counsel credits during	
			Chief Counse
		No dues	Signature with seal
1. Hostel Rector			
2. Library			
3. Mess			
4. Office			
		For Office Use	
Mr. / Miss		class	
Academic Year	Reg	. No	
	This Roster Form	n is received in the office	e on
The student has paid	the college fees as 1	nentioned below:	
1. Tuition Fees	Receipt No.	Date	Amount
2. Other Fees	Receipt No.	Date	Amount
3. Hostel Fees	Receipt No.	Date	Amount
4. Mess Fees	Receipt No.	Date	Amount
5. Arrears Fees	Receipt No.	Date	Amount
5. Arrears Fees	Receipt No	Date	Amount
Clark	A	cademic In charge	Principal