

SKILL ENHANCEMENT COURSES PREFERENCE

JULY-DECEMBER 2017

Department:

Semester: Ist

Session:

Campus:

| S. No. | Enrolment No. | Name | Preference I | Preference II |
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Note:

- Please do not use abbreviations and write the complete title of the course.
- Please send **SOFT COPY ONLY IN MS WORD FORMAT** atrahul_dms@cukashmir.ac.in latest by 21st August 2017.
- In any case, preferences once given by the student **CAN NOT BE CHANGED** latter on.
- **A Student would not be allowed to opt for the course offered by his/her concerned Department.**
- Syllabus of the Skill Enhancement Courses can be downloaded from the following link on the University's website: <https://www.cukashmir.ac.in/teaching-evaluation/Choice-Based-Credit-System.aspx>

Sd/-
Head/Coordinator
Department of _____