

Tribhuvan University
Faculty of Management
Shanker Dev Campus

BBS 4th year Course Registration Form

Name of the Student:-

Address: - Zone District

Level: -Batch:-

T.U. Registration No: -..... Roll No.....

The Campus Chief,
Shanker Dev Campus,
Putalisadak.

I would like to apply for the enrollment of my name to study the following subjects at BBS Level Fourth Year of this Campus.

S.No.	Subject's Name	Full Marks
	<u>Core Courses</u>	
1	MGT 220 Entrepreneurship and Enterprise Development	100
2	MGT 221 Business Research Methods	50
	<u>Concentration Area</u>	
3		100
4		100
5		100
6	MGT 401 Final Project Work	50

Verified By: -

Receipt No. of Admission Fee:-

Signature: -

Signature of the students:-

Date: -

Date:-