



Government Polytechnic, Chhatrapati Sambhajanagar

(An Autonomous Institute of Govt. of Maharashtra)

Osmanpura, Chhatrapati Sambhajanagar — 431005

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Date :

Application for Course Registration of Open Elective Course

(Only for students for admitted in Third Semester)

To,

Head of the Department,

Govt. Polytechnic,

Chhatrapati Sambhajanagar.

Subject: Application for Course Registration of Open Elective Course.

Respected sir,

I wish to apply for course Registration of open elective offered during ODD term 2025-26 as per the following table. Please register me for the below mention course. Kindly consider my application for exemption as per rules of the institute.

Name of Candidate : _____ Enrollment No.: _____

Mobile No.: _____ Programme: Diploma in _____

(Only One open elective course should be selected by each student. Tick ✓ mark in the selected subject box)

Sr.No.	Open Elective Courses			Course Registration in ONE of the following courses
	Course Code	Course Title	Course Abbreviation	
1.	7G701	Emerging Trends in Automobile	ETA	<input type="checkbox"/>
2.	7G702	Emerging Trends in Civil Engineering	ETC	<input type="checkbox"/>
3.	7G703	Electrical Wiring and Accessories	EWA	<input type="checkbox"/>
4.	7G704	Computer Hardware and Networking	CHN	<input type="checkbox"/>
5.	7G705	Digital Marketing	DMK	<input type="checkbox"/>
6.	7G706	Open Elective (Advance Excel)	AEX	<input type="checkbox"/>
7.	7G707	Image Enhancement Using GIMP	IEG	<input type="checkbox"/>
8.	7G708	Ethical Driving Practice	CHN	<input type="checkbox"/>
9.	7G709	Fashion Accessories	FAC	<input type="checkbox"/>
10.	7G110	Robotics and Automation	RAM	<input type="checkbox"/>

Yours Faithfully

(Signature of Student)

Name & Signature of Registration Incharge:

Signature of HoD: