

**BOOK BANK REGISTRATION FORM**

Name of the Student :  
Department :  
Admission Number :  
Year of Study :

**CERTIFICATE**

Certified that Mr./Mrs./Miss. ....  
is a student of ..... Department and He/ She belongs to the  
..... (Only for SC, ST Students) reservation community. I recommend for  
enrolling him/her as a member of Book Bank Scheme, College of Engineering, Thalassery.

Place:  
Date:

(Seal)

Signature

Head of the Department