



Leading University Course Distribution List

ROF-20

Department:

Faculty Member (Regular/Adjunct):

Trimester/Semester:

Date:

Designation:			Name:	Contact:		Email:			
Sl	Program	Course Code Theory/Sessional	Course Title (Theory/Sessional)	Offererd Semester/Trimester	Cr. Hr.	No. of Classes	Sec.	Expected Students	Remarks
1									
2									
3									
4									
5									
6									
7									

Designation:			Name:	Contact:		Email:			
Sl	Program	Course Code Theory/Sessional	Course Title (Theory/Sessional)	Offererd Semester/Trimester	Cr. Hr.	No. of Classes	Sec.	Expected Students	Remarks
1									
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6									
7									

Head of the Department

Office of the Registrar