Closing Date: 04.11.2026

NOTICE

All the Students of **Advanced Technological Institute Sammanthurai**

Renewal of Registration – 2026, 1st Semester

Please pay attention to renewing your registration of all the **Full time and Part time** students for the 2026, 1st Semester.

- **Full time students** submit your **student record book** and the duly filled semester **renewal form** to the relevant officer on or before the closing date.
- **Part time students** submit your **student record book** with the duly filled semester **renewal form** and **bank slip** for the course fee as follows;

Course	Year	Semester Fees
HND in English	2nd year	Rs.17,000.00
	3rd year	Rs.17,000.00
HND in IT	2nd year	Rs.30,000.00
	3rd year	Rs.30,000.00

* The students who have to sit for repeat examinations after the course period should pay Rs.500.00 per semester to maintain their Studentship.

The payments can be made at any branch of **People's Bank** to be credited to ATI Sammanthurai, **A/C No: 064 1001 5005 1855.** The CDM deposit will not be accepted.

Please **hand over** the copy of the pay slip to the ATI and **collect the receipt from the relevant officer on or before 05th of November 2026.** Those who failed to pay the course fee on time will be surcharged 25% of their course fee.

Director
Advanced Technological Institute
Sammanthurai.

Closing Date: 04.11.2026

ADVANCED TECHNOLOGICAL INSTITUTE - SAMMANTHURAI

Semester Renewal Form – Academic Year 2026, 1st Semester

[Please tick (√) the relevant cage]

01. Student's Name with Initials : ……

02. Registration Number : ……

03. Contact Number : ……

04. Name of Course : AC / EN / IT

05. Gender : Male ☐ Female ☐

06. The year for the renewal : 1st ☐ 2nd ☐ 3rd ☐ 4th ☐…….

07. The semester for the renewal : 1st ☐ 2nd ☐

08. Completed Semester / Semesters :-

Year	Semester	
	I	II
I		
II		

Year	Semester	
	I	II
III		
IV		

Course fees payment for the academic year 20…… 1st / 2nd Semester **(Only for part time courses)**

Date :- …… Receipt No: - …….

I hereby certify that the above information is true and correct Also I request to renew the registration for 20 …1st / 2nd Semester

Date :- ……. ……

Student's Signature

Recommendation of the Librarian

All books of the library are returned / not returned ……

Signature of the Librarian

Recommendation of the HOD

The above student expecting the renewal for registration, participate / not participate in the lectures and practical classes and maintain/ not maintain discipline as a student of the Institute. Therefore, I recommend / not recommend him / her for renewal of the registration.

……

Date :- …… Signature of the HOD

Official Use only

According to the above information he / she has paid / not paid the course fees for **1st / 2nd** Semester **I / II / III / IV** year.

……

Date :-……. Signature of the M/A (Account)

Approval of the Director / Assistant Registrar

Referring to above facts I approve / not approve the renewal of the registration.

Date :- …… ……

Signature of the Director / A R