



**BANGABANDHU SHEIKH MUJIBUR RAHMAN AGRICULTURAL UNIVERSITY**  
Gazipur 1706

**Course Management\***

**Term: Summer/Autumn/Winter .....**

1. Name of the Instructor (s) : .....
2. Course Number and Title : .....
3. Total Number of Students of the Course : .....
4. Date of Distribution of Course Schedule: .....
5. Total Number of Classes Taken : .....
6. First Mid Term Examination held on : .....
7. Second Mid Term Examination held on : .....
8. Number of Quizzes Taken : .....
9. Final Examination held on : .....
10. Whether Term Paper/Assignment was given : (Yes / No)
11. Student's Attendance Register maintained : (Yes / No)
12. Grade Report Submitted on : .....

Signature of the Instructor

Date: .....

Signature of the Head of the Department

Date: .....

Submitted To:

Dean, Faculty of Graduate Studies, BSMRAU.

\* This form will be filled up by the respective course instructor.