

**OFFICE OF THE REGISTRAR :: DIBRUGARH UNIVERSITY :: DIBRUGARH**

Memo No.: DU/DR-A/PG-AEC(CBCS)/22/1089

Date: 09.09.2022

**2<sup>ND</sup> NOTIFICATION****Ability Enhancement Courses (AECs) for the 3<sup>rd</sup> Semester Students  
of the Post Graduate Programme of Dibrugarh University  
Session 2022-2023**

In continuation to the Notification (Revised) vide No. DU/DR-A/PG-AEC(CBCS)/22/1086 dated 08.09.2022, this is to notify for information of all concerned that the following Ability Enhancement Courses (2 Credit each) for the 3<sup>rd</sup> Semester Students offered by the Departments of – (i) Economics, (ii) Centre for Studies in Languages and (iii) Applied Geology, Dibrugarh University for the session 2022-2023. The Students are hereby advised to contact the concerned Teaching Department for getting admission to the relevant Course. The AECs shall be **inter-disciplinary as well as intra-disciplinary in nature.**

**Details of the AECs**

Title of the Courses	Semester	Departments/ Centre for Studies Offering	Name of the Course Teacher	Intake	Departments and Centres getting preference.
Data Collection and Analysis for Social Science Research (DCASSR)	3 <sup>rd</sup> Sem.	Economics	Mr. Rantu Hazarika Dr. Daisy Konwar	79	Economics, Sociology, Political Science, Mathematics, Statistics, Commerce, History, MSW
Costumes and Designs of the Bodos	3 <sup>rd</sup> Sem.	Bodo	Dr. Pratima Brahma Mrs. Munmi Baro	22	Dept/Centre for Studies under faculty of Humanities & Law, Social Science
Elements of GIS (AG3A1)	3 <sup>rd</sup> Sem.	Applied Geology	Dr. Ratamali Machahary	20	Restricted to Applied Geology.
Winter Training- Lab visit (AGP-3A-1)	3 <sup>rd</sup> Sem. 1 <sup>st</sup> Sem. M.Sc. Tech. (Applied Geophysics)	Applied Geology	Dr. Himanta Borgohain	23	Restricted to Applied Geology

The enrolment to the AECs shall be done on *First Come First Serve* basis by the Teaching Department/ Centre for Studies concerned.


Further, the Students are advised to apply for admission in the prescribed format attached herewith as **Annexure A** from **09.09.2022** and submit the same at the Teaching Department / Centre for Studies concerned by **14.09.2022**.

As per the earlier Notification (Revised) vide Memo. No. DU/DR-A/PG-AEC(CBCS)/22/1086 dated 08.09.2022 the classes of the 3<sup>rd</sup> Semester Ability Enhancement Courses may be arranged as per the following time Table:

- Thursday : 3.30 p.m. to 5.30 p.m.
- Friday : 3.30 p.m. to 4.30 p.m.

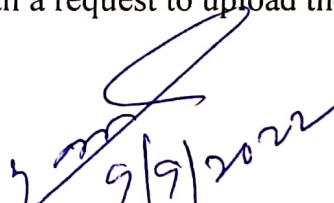
**N.B.:** Subsequent notification(s) in this regard may be issued in due course of time.

Issued with due approval.

  
(Dr. B.C. Borah)  
Joint Registrar (Academic)  
Dibrugarh University

Copy to:

1. Hon'ble Vice-Chancellor, Dibrugarh University, for kind information.
2. The Deans, Dibrugarh University, for kind information.
3. The Registrar i/c, Dibrugarh University, for kind information.
4. The Heads and Chairpersons of the Teaching Departments/ Centres for Studies, Dibrugarh University for information and needful.
5. The Academic Officer, Dibrugarh University, for information.
6. The Programmer, Dibrugarh University for information and with a request to upload the notification in the Dibrugarh University website.
7. File

  
(Dr. B.C. Borah)  
Joint Registrar (Academic)  
Dibrugarh University



**Annexure - A**

**DIBRUGARH UNIVERSITY:: DIBRUGARH::786 004**

**REGISTRATION FORM FOR ABILITY ENHANCEMENT COURSE**

**(The Applications must be forwarded by the Head/ Chairperson of the Teaching Department/  
Centre of Studies/ Institute concerned)**

1. Name of the Applicant:.....
2. Department/ Centre : .....
3. Programme pursuing on the date of application .....
4. Semester with Roll No.....Semester, Roll No. ....
5. Address for correspondence:.....

.....

Mobile No. ....

E-mail ID: .....

6. Applied for Registration for the Ability Enhancement Course on

.....

**DECLARATION**

I hereby declare that I am a bonafide and Regular student of Dibrugarh University studying in the.....Semester of the ..... Programme bearing Roll No. .... of the Department of ...../ Centre for Studies in ..... I want to pursue the .....

(Name of the Course) as an Ability Enhancement Course and shall abide by the relevant rules and regulations of the University.

Date:

Full Signature of the Applicant

**Forwarded by the Head/ Chairperson of the Teaching Department/ Centre of Studies/  
Institute concerned.**



**FOR OFFICE USE ONLY**

**Admission recommended/ not recommended**

**Course Teacher, Ability Enhancement Course in  
....., Dibrugarh  
University**