

<u>Application Form for Course Drop / Award of W Grade - MS / PhD Students</u>

Student Name:		Regn No			
Discipline:		Semester			
Contact No: (Mobile)		Email			
DROP					
Course Code	Course Title	Course Credit	Core/Elective	1 st Regn	Repeat
1 – 2 weeks No Effect					
Dept PG Coord	d:				
	Appro	ved / Not Approved	l		
	Respective 1	HoD Signature witl	n Date		
		For official use only			
Posted on CMS of	on (Date)				
EC Clerk (Signar	ture) DC	E (Signature)			