

**REGISTRATION DEPARTMENT
FORM FOR DROP SEMESTER**

ID No.: NAME:

GSM NO.: YEAR & SEMESTER DROPPING:

YEAR & SEMESTER REJOINING:

| | | |
|--|-----------------------------------|--------------------------------|
| DIPLOMA <input type="checkbox"/> | BACHELOR <input type="checkbox"/> | SPECIALISATION: |
| SPONSORSHIP: DIRECT <input type="checkbox"/> | MOHE <input type="checkbox"/> | MECIT <input type="checkbox"/> |
| OTHERS: _____ | | |

REASON FOR DROPPING

Signature of Student

Date

Official Use:

| | | |
|-------------------------|-------------------|-------------------|
| Date Received: | Accounts Office | Library |
| Name of Staff Received: | Name of Staff: | Name of Staff: |
| Signature | Signature & Stamp | Signature & Stamp |

A student may be allowed to drop semester by requesting a formal postponement of study for one semester renewable for a second semester. In the case of sponsored students written approval from the sponsor and in the case of others a written approval from the guardian should also be submitted. For further details refer clause 5.6 in the Student Hand Book