

COURSE ADD & DROP FORM

(Main Campus)

Name: _____
(In Capital Letters)

STD ID: _____

Cell No.: _____

REGISTERED COURSES			
Sr. No	Class ID	Course Name	Faculty Name
1			
2			
3			
4			
5			
6			

DROP COURSES			
Sr. No	Class ID	Course Name	Penalty Applicable (To be filled By Registration Officer)
1			Fin. / Acad. / None
2			Fin. / Acad. / None
3			Fin. / Acad. / None
4			Fin. / Acad. / None
5			Fin. / Acad. / None
6			Fin. / Acad. / None

Reason For Dropping Courses: (Please **TICK** on appropriate reason)

- | | |
|---|---|
| <p>1. Failed in the pre-requisite course.</p> <p>3. The course is not interesting or relevant.</p> <p>5. Want to switch to another elective/substitute.</p> <p>7. Other _____</p> | <p>2. Reducing course load.</p> <p>4. Due to low GPA.</p> <p>6. Schedule problem.</p> |
|---|---|

ADD COURSES		
Sr. No	Class ID	Course Name
1		
2		
3		
4		
5		
6		

Student Signature

Date: _____

Registration Officer
(R & E Department)

Date: _____

Program Manager
(College Concered)

Date: _____