



APPLICATION FORM FOR WITHDRAWAL FROM A COURSE

(THIS FORM IS SUBMITTED AT THE OFFICE OF THE CONCERN HoD)

To

The Head of the Department (HoD)
Business Administration / Electrical Engineering /
Computer Science / Education / Mathematics
Sukkur IBA

Respected Sir,

I want to withdraw from (course name) _____

For the reasons mentioned below:

Kindly permit me to do so.

Yours Obediently,

(_____)

Contact No. of the Student: _____ Name of students

Date: _____ CMS Id: _____ Program, Semester and Section _____

(TO BE FILLED BY INSTRUCTOR)

Approved [] Reasons: _____

Not Approved [] Reasons: _____

Instructor Name Date Instructor's Signature

FOR OFFICE USE ONLY

Allowed []

Not Allowed [] _____
Signature of the HoD

RECEIPT FOR STUDENT

(Name of the students) Mr./Miss/Mrs. _____

of BBA/MBA/BS/BE/B.Ed/ADE: Semester _____ CMS Id: _____

is allowed to withdraw a course _____.

Date Signature of Assistant to HoD

Note: Student can withdraw a course, if he/she has no any other course withdrawn due to Pre Requisite or any other reason in the current semester. **Only one course can be withdrawn in a semester.**