



DROP COURSE(S) FORM

Drop Course(s) Details:

Sr. No	Course Code	Course Name	CH	Section	Reason to Drop Course

Note: This form must be submitted before the deadline mentioned on the academic calendar for add/drop courses.

Thanking you in anticipation. Yours sincerely,

Program: ☐ MBIT ☐ BBIT ☐ BSBA

Name: _____

Signature _____

Roll No: **F** _____

Current Semester/Term: _____

Cell No.

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Dated: _____

For Office Use ONLY

Program Coordinator

Director