

Form for Adding / Dropping an Elective Subject

Name of Student: _____ Contact No.: _____
Enrollment Number: _____ Roll Number: _____ E-mail ID: _____
Program/ Department: _____ Year/Sem: _____ Date: _____

Subject to be Added:

Subject Name: _____

Subject Code: _____

Subject being taught in:

1. Department: _____

2. Program: _____

3. Year/Sem: _____

4. Section: _____

Subject to be Dropped:

Subject Name: _____

Subject Code: _____

Subject being taught in:

5. Department: _____

6. Program: _____

7. Year/Sem: _____

8. Section: _____

I declare that the above mentioned subject can be accommodated in my existing timetable, and that there are no clashes in classroom timings.

Signature of Student

Comments by the Subject Teacher (subject to be added)

Name & Signature of Subject Teacher

Comments by the Office of Dean, Academic Affairs

Name & Signature of Official

For the use of SDC

Name & Signature of Official