

JEPPIAAR INSTITUTE OF TECHNOLOGY

(An Autonomous Institution)
Self-Belief | Self Discipline | Self Respect





Kunnam, Sunguvarchatram, Sriperumbudur-631604

OFFICE OF THE CONTROLLER OF EXAMINATIONS APPLICATION FOR WITHDRAWAL FROM SEMSTER END EXAMINATIONS (SEE) ______20__ (PERMITTED ONLY ONCE DURING THE ENTIRE DURAITON OF THE PROGRAM)

Name of	the Student							
Register	Number							
Degree &	k Branch							
Year of Admission & Semester Studying		20 & Semester:		Is / Are any Course(s) withdrawn during the previous semester (s)? : Yes* / No				
Semester	or Withdrawal from End Examinations Proof to be attached)							
I .	already appeared tion in this semester	No. of Courses:	Course code(s):					
	ourses to be withdrawn &	Course Code						
its course code(s) with examination(s) date & session		Date of Exam						
CAUTITIO	Aon(s) and or session	Session						
History o	of arrear(s) if any:	Yes*/No						
Encl: 1)	ible for withdrawal Proof for withdrawal o Student's Signature with the should reach Principal's officential in the should reach Principal's officential.	h Date	before the comm	,	_	re of the pa	arent	
]	Recommendati	ion by the D	epartme	ent			
Mr/Ms			(Reg. No) has secured		
more than	n 75% attendance in all t	he courses of the	e current sem	ester . He	e / She has p	aid the Ser	mester End	
	tions fee and the and the					•		
•	for withdrawal from the sper the regulations.	End Semester	Examination	for the	all the course	s / courses	mentioned	
Date:	Verified Faculty Advisor	Recommended Head of the Departr			Approved / Not Approved t PRINCIPAL			

Note: Original application with enclosures to be submitted to COE office after getting the approval from the Principal.