**MY UNIVERSITY**

**COURSE WITHDRAWAL FORM**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reg. No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GPA: \_\_\_\_\_\_\_\_\_\_\_ CGPA: \_\_\_\_\_\_\_\_\_\_\_ Semester: Fall Spring

**Course Registered in current semester**

|  |  |  |  |
| --- | --- | --- | --- |
| **S. No** | **Course Code** | **Course Title** | **Credit hours** |
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**Courses withdraw:**

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| --- | --- | --- | --- |
| **S. No** | **Course Code** | **Course Title** | **Add/Drop** |
|  |  |  |  |
|  |  |  |  |
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**Reason**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Recommendations:**

Program Coordinator Head of Department

Registrar

**For office use only**

Date Received: \_\_\_\_\_\_ Received By: \_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Diary Number: \_\_\_\_\_\_\_

**WITHDRAWAL FORM**

* Mention the courses you wish to withdraw.
* Withdrawal from a course is allowed only during 4-6 week of the semester which shall be recorded in the transcript. Consequently, **Grade W** will be awarded to the student which will have no impact on the calculation of the CGPA.
* Withdrawals after the 12th week will be automatically awarded "F" grade which will count in the GPA and stay on the transcript
* Withdrawal is not allowed after the end of the 12th week of the semester.