

University of Management and Technology

Course Withdrawal Form

I.D). NO.:						Date:		
La	st Name/Si	Surname: First Name:				Middle Name:			
Pr	ogram:				Sei	mester:	Spring 🗖/Summer 🗖/Fa	ılı 🗖	
То	tal Credit F	lours com	pleted:			CGPA:		_	
En	nail:	Contact No.:							
Co	ourse(s) to	he Witha	lrawal:						
Sr No	Course Code		Course	Title	Cr Hrs	Section	Resource Person Name & Signature	Advisor Name & Signature	
1.									
2.									
3.									
4.	_							+	
	_								
	nmendatio	on of COD	<u>:</u> 						
					(F 0.60				
	ffice of the pproved:	e Registrar □					:	Controller of Examinations Grade Entered: □ □	
	ot Approve	ed:						es No	
	ignature ate:						Signature Date:		
									

Guidelines for 'w' Grade:

- Participant seeking withdrawal from course(s) shall apply on or before the withdrawal date specified in the Academic Calendar to the Office of the Registrar.
- ➤ In case of any disciplinary action, 'W' shall not be allowed.
- In case of 'W' participant will have to pay the fee as repeat course.