Office of the Controller of Examinations

KPR Institute of Engineering and Technology



APPLICATION FOR WITHDRAWAL FROM END SEMESTER EXAMINATIONS

Date:

1.	Name of the Candidate (CAPITAL Letters)			:	
2.	Register Number			:	
3.	Programme of Study & Regulations			:	B. E. / B. Tech. / M. E. R20
4.	Branch			:	
5.	Batch			:	
6.	Current Semester			:	
7.	Month & Year of Examination			:	
8.	CGPA till	ister Number gramme of Study & Regulations nch ch rent Semester nth & Year of Examination PA till last Semester ory of Arrears ading Arrears son for Withdrawal of Enclosed of Category bile Number of Course(s) for Withdrawal			
9.	History of Arrears			:	Yes / No
10.	Standing Arrears			:	Yes / No
11.	Reason for Withdrawal			:	
12.	Proof Enc	ason for Withdrawal oof Enclosed oof Category obile Number o. of Course(s) for Withdrawal			Yes / No
13.	Proof Category			:	Medical / Sports / Others :
14.	Mobile Number			:	
15.	No. of Course(s) for Withdrawal			:	
Sl.No	. Sem				Course Title

I hereby declare that the information furnished above is true. So far I have not applied for withdrawal of Examinations.

Signature of the Candidate

Signature of the Parent

Note: Student having standing or history of Arrear is not eligible for withdrawal from examination.

Recommended and Forwarded

Chief Mentor / Mentor

Head of the Department

Approved / Not Approved

Head / CFAC Principal