

APPLICATION FOR CHANGE OF FACULTY/SUBJECT/ADDON/FOUNDATION/ACTIVITY/SHIFT

1.	ICG Enr_NO.	:	ICG/
2.	Name of the Candidate	:	
3.	Father's Name	:	
4.	Percentage of 12 th	:	
5.	Course Structure (as per the	e format g	iven below)
	_		here the change is desired. Subject le should be filled up clearly.
	Present		Desired
A . P	Programme		
	Subject Combination:		
	. Code		Sub. Code
			13
	oundation		
(Frer	nch/German/Hindi/English)		
D. A	Add-on (COSD)		
	activity		
F. S	Shift		
	ly for UG Commerce / BBA)		
6.	Date		Form verified(Office)
Sia	nature of Parent/Guardian		Signature of Candidate
Jig!	nature of Parent/Guardian		Signature of Candidate
Forn	n Checked & Time Table Verified		
Nan	ne & Signature of Time Table 0	coordinato	r RECTOR
			KEUTUK

VICE CHANCELLOR

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