

NATIONAL INSTITUTE OF TECHNOLOGY: TIRUCHIRAPPALLI – 620 015 OFFICE OF THE DEAN (ACADEMIC)

COURSE DISCONTINUATION FORM

Name	:			
Roll No.	:			
Degree	:	B.Tech. / B.Ar	ch	./ M.Tech./ M.Sc. / MCA / MBA / MS / Ph.D.
Department	:			
Branch / Specialization	:			
Address	:			
Phone No	:			
E-Mail ID	:			
Reasons for Discontinuation	:			
(Attach necessary proof)				
Declaration				
I have applied for discontinuation of the course, well aware of the condition that I will not				
be eligible to be readmitted without reapplying for entry through the relevant competitive				
selection process.				
				Signature of the Student
				Accepted: Signature of the Parent
Signature of the				
Faculty Advisor / Research Guide			:	
2. HoD / 1 st Year Coordinator			:	
Dean (Academic)				