



Office of Academic Affairs

Add/Drop Form

BS-MS (Dual Degree) : _____ Semester

1. Name : _____

2. Roll Number :

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3. Department : _____

4. Hall of Residence : _____

Dropping Courses					Adding Courses				
S. No	Course Details		Credit	Signature of Instructor	Course Details		Credit	Signature of Instructor	*R/S (if app.)
	No.	Name			No.	Name			
1									
2									
3									
4									

* Mark R for Repeat, S for Substitute

Date: _____

Signature of Student

Dean, Academic Affairs