APPLICATION FORM FOR CHANGE OF BRANCH IN SECOND YEAR
(Revised on 2nd Apr 2016)

1. Name in full: ......................................................... Regn. No. .................

2. Parent’s name ......................................................... Phone No. .................
   (F/M/G#): .........................................................

3. Dept./Branch ......................................................... Sem/Sec. .................

4. Email ID ......................................................... Phone No. .................

5. Hosteller/Day scholar. If hosteller, specify the Hostel/Room No: ...........................................

6. Reason(s) for requesting the change of Branch: ........................................................................
   .................................................................................................................................

7. Preference of branches for change: 1. .........................................................
   2. .........................................................
   3. .........................................................

8. Supporting Documents attached.
   (i) Letter from parents consenting the change of branch: Yes/No
   (ii) Results with mark sheet of last examination verified by DCE (Tech): Yes/No

9. Total nos. of backlogs: ..............................................................

10. Signature of the student: ......................................................... Date: ....../....../...........

11. Remarks by FE, SMIT about outstanding fees if any: ............................................................
   .................................................................................................................................

12. Recommended by HOD/ Dean (A)*: ......................................................... Date: .................

13. Approved by Director/ Dean (A): ......................................................... Date: .................

14. Duly filled in application endorsed/approved by the competent authorities along with supporting documents as stated above shall be submitted to the Dean (A) for record and further actions. [Contact No: 03592-246145 OR 03592-246117/246118/246119/246120 ext: 270]

# F: Father/M: Mother/G: Legal guardian – Strike out whichever is not applicable
* Dean (A) only for 1st year students and HODs for Higher semester students.