

COLLEGE OF POST GRADUATE STUDIES**G.B. PANT UNIVERSITY OF AGRICULTURE & TECHNOLOGY, PANTNAGAR-263145 (U.S. NAGAR)**

(To be submitted in single copy)

Sub.: Application for discontinuation from degree programme

Name of the student : _____ ID No. : _____

Degree Programme : _____

Major : _____

Minor (if applicable) : _____

Semester & Year of Admission : _____ Semester of Degree Prog. : _____

Reason for withdrawal : _____
(please enclose relevant documents, if applicable) _____

Signature of the Student

Recommendation & signature of Advisor (with name, designation & Seal) :

Signature of Hostel Warden (with seal) :

No Dues (Comptroller Office) :

Recommendation & Signature of the HoD (with seal) :

Countersignature of Medical Officer I/C (in case of discontinuation on medical grounds) :

Recommendation & Signature of the Dean (concerned College with official seal) :