

Motilal Nehru National Institute of Technology Allahabad

Conversion from Full time to Part time

Name of the Student:..... Reg. No:

Department:..... Date of First Registration.

Name of the Supervisor(s):.....

Present Registration Status:.....

C.P.I. in second Semester:.....

Justification/Reason for Conversion :

.....

(Signature of the Student)

Comment and recommendation of the Supervisor(s):

(Signature of the Supervisor(s))

Date and Ref No of DMPC meeting*:

Recommendedby: ConvenerDMPC

Head of theDepartment

Approvedby: ChairpersonSMPC

* Minutes of DMPC should be enclosed.