



Semester Freeze/Unfreeze form

To be submitted in
Student's Office

<u>Ref.# (Official Use Only):</u>	<u>Roll No:</u>	<u>Date:</u>
<u>Name:</u>	<u>Father Name:</u>	<u>Program:</u>
<u>Current Semesters:</u>	<u>Session:</u>	<u>Student Email:</u>
<u>Contact No:</u>	<u>Department:</u>	<u>Coordinator Name:</u>

Subject of Application: _____

Please explain the issue here:

<u>Freezing Semester:</u>	<u>Registration of Freezing Semester Status:</u>		<u>Date of Registration:</u>	
<u>Total Passed Semesters:</u>	<u>Yes</u>	<u>No</u>	<u>Start</u>	<u>Closed</u>
<u>No of Classing Held:</u>	<u>Fee Paid Details</u>		<u>Mid term Exam Status:</u>	
	<u>1st Installment</u>	<u>2nd Installment</u>		
<u>No of Classes Attended:</u>				

Recommendations

Student's Signature

<u>Program Manager:</u>	<u>HoD:</u>

FOR OFFICE USE ONLY

<u>Financial Status by Accounts Office:</u>	<u>Fee Paid Details</u>	
<u>Signature & Stamp</u>	<u>1st Installment Paid</u>	<u>2nd Installment Paid</u>

COMMENTS:

Student Incharge: _____

Signature

Decision By Registrar: _____

Allowed to Freeze with Financial Liability	Allowed to Freeze without Financial Liability	Freeze Not Allowed
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Signature

Application Forwarded to:		Application Received By:	
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