

Date:

The Registrar

Daffodil International University

Through: Dean, FSIT

The Head, CSE

Daffodil International University.

Batch advisor name, signature with Employee ID:

Subject: Application for semester drop -----

Dear Sir,

Sincerely yours,

Name :

Student ID :

Mobile No :

Subject Code, Title and Section

1.

2.

3.

4.

N:B: After taking all concerns signature, Please submit the application to the CSE Department.