

## भारतीय प्रौद्योगिकी संस्थान गुवाहाटी

## Indian Institute of Technology Guwahati Guwahati - 781 039

FORM NO. **SA/01** 

## **COURSE ADJUSTMENT FORM FOR SA COURSES**

(Please fill up the form in capital letters)

1.	Na	ame		:															
2.	Roll Number		:																
3.	Discipline/ Branch		:		•							1				•			
4.	Academic Year		:																
5.	Semester			:	ODD (July-Nov) semester / EVEN (Jan-May) semester														
6.	IITG Email:							Mobile nber:											
Please drop the following SA course from the list of courses registered by me.																			
SI. No.		Course No.	С	Course Title									Signature of the Course Instructor with date						
(i)																			
Please add the following SA course to the list of courses registered by me.																			
SI. No.		Course No. C		oui	ourse Title								Signature of the Course Instructor with date						
(i)																			
Dat	e:											Signature of the Student							
Signature of Course Coordinator (or) Faculty-Incharge  HoS (Students' Affairs)											Recommended  ADOSA-1/ Dean, SA								
Information is entered in the Database on											•	ı	Appr	ove	d				
Signature of Dealing Staff of Academic Affairs Section										ADOAA(UG)/ DOAA									
							_												

**Note:** Please keep a record of photocopy of this form as:

(i) One copy to the student, (ii) One copy each to the course instructor/ coordinator (iii) One copy to HoS(SA) and (iv) One copy to the Academic Affairs Section.