



# Shri Mata Vaishno Devi University

Kakryal, Katra-182320 (J&K) INDIA

(A Statutory Technical University of J&K Legislature; recognized u/s 2(f) & 12(B) of UGC)

## **FORM NO. AA/05: Application Requesting for Grant of Permission for Change of Credit Course(s) into Audit Course(s)**

### **1. Details to be filled by the student:**

- a. Name of Student: \_\_\_\_\_
- b. Category: \_\_\_\_\_
- c. Nationality: \_\_\_\_\_
- d. Entry No: \_\_\_\_\_
- e. School: \_\_\_\_\_
- f. Programme: \_\_\_\_\_
- g. Semester: \_\_\_\_\_
- h. Credits obtained till previous semester \_\_\_\_\_
- i. CGPA till previous semester \_\_\_\_\_  
*(please enclose previous semester grade sheet)*

j. Name of the Credit course(s) for which change into Audit Course(s) is requested

S.No.	Course Code	Name of Course

**Signature of the Students**

**Date:**

*Forwarded to Head of the School through Concerned Course Coordinator(s)*

### **2. Recommendation of Concerned Course Coordinator(s)**

**(Recommended / Not Recommended)**

**Remarks:**

\_\_\_\_\_  
**Signature**



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### 3. Recommendation of HoD:

Remarks of HoD, So \_\_\_\_\_:

\_\_\_\_\_  
**Signature**

### 4. Forwarded to the Office of Dean, Faculty of \_\_\_\_\_:

Remarks of Dean, \_\_\_\_\_:

Permitted :

Not Permitted:

\_\_\_\_\_  
**Signature**

### 5. Forwarded to Head of the School (for necessary action as per approval)