

Application Format for Withdrawal of Admission

Date:

To
The Director
BVIMR, New Delhi

Respected sir

I want to withdraw my admission from course _____. I am studying in _____ year, _____ semester and want to withdraw because of following reasons:

- 1) _____
- 2) _____

You are requested to kindly consider my application for withdrawal at the earliest.

Student Signature

Name of the student _____

ERP ID _____

PRN _____

E mail Id _____

Mobile Number _____

No Dues

1. HOD - Signature _____

2. Student Support Cell (TC / Migration Not Issued) Signature _____

3. Library - Signature _____

4. CMS Department - Signature _____

5. Accounts Department – First Year Fee status _____

Second Year Fee Status _____

Third Year Fee Status _____

Forth Year Fee Status _____

Fifth Year Fee Status _____

Director