

OFFICE OF THE POST-GRADUATE STUDIES, (PGS)
NATIONAL INSTITUTE OF FOOD TECHNOLOGY ENTREPRENEURSHIP &
MANAGEMENT

Date: _____

Subject: - Application for discontinuation from degree programme

Name of the Student: - _____

Registration Number: - _____

Year of Admission: - _____

Department: - _____

Reasons for discontinuation: - _____

(Signature of the Student)

Supervisor / Guide Recommendation:-

No-Dues (Account Department)

NO-Dues (Library)

(Hostel Warden)

Head of the Department

Recommendation of Dean (PGS)