

KAMLA LOHTIA S.D.COLLEGE, LUDHIANA

CHANGE OF SUBJECT/ FACULTY

Name of student : _____

Class : _____

Roll No : _____

I wish to change the following subject

Existing Subjects	Lect. Attended / Delivered	Concerned Teacher Initial	Subject to be change	Concerned Teacher Initial
1.	1.	1.	1.	1.
2.	2.	2.	2.	2.
3.	3.	3.	3.	3.

Signature of Parents/Guardian

Signature of Students

Recommended

Tutor

Senior Tutor

Time Table Incharge

Allowed/Not Allowed

Principal

For office use

Received Rs. _____ against fee change of subject

Receipt No. _____ Dated _____

Fee Clerk

Teacher's Concerned to please note and make the necessary change in the Attendance Register of the students.

Signature _____
