



महाराष्ट्र शासन



शासकीय अभियांत्रिकी महाविद्यालय, नागपूर

सेक्टर 27, मिहान पुनर्वसन वसाहत खापरी, नागपूर-441108

"To be an Institution of National Repute Creating Globally Competent Technocrats to Serve the Society"

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APPLICATION FOR CHANGE OF COURSE

1. Name of the Student (In Full) :
2. Application ID :
3. Academic year of Admission in the present Institute:
4. Whether Admission is under Supernumerary quota :
(Y/N)
5. Address for correspondence with :
Pin code & Telephone Nos. (if any)
6. Name of Parent Institute / Present Institute with : DTE CODE _____
DTE Code Name _____
7. Course of Study Details : Year / Semester _____ Branch _____
Choice Code _____
- 8..Details of the Result of last exam.

Branch/ Faculty	Year / Semester	Year of Passing	Summer/ Winter	No. of attempt	Percentage	University
1.	2.	3.	4.	5.	6.	7.

9. Details of backlog subjects (if any) :
10. Name and DTE code of aspiring institute where : DTE CODE _____
admission by transfer is sought Name _____
11. Branch & Year / Semester and university in which : Branch / Course _____
admission by transfer is sought Year/Semester _____
Choice Code _____
University _____
12. Reasons for change of Institute/ change of branch and : _____
University _____

I the undersigned state that the information stated above is true to my knowledge and belief. I am fully aware that transfer/ change of institute/branch is not a right and it is up to the authority to decide my case on the basis of merit.

Date :- / /202

Signature of Student