

National Textile University, Faisalabad

Office Copy

Course Add/Drop Form

Student's Name: _____ Registration No: _____

Semester: _____ Year: _____ Technology/Section: _____

Course/s being Added		
Course Code	Course Title	Credit Hours
Course/s being Dropped		

Student's Signature: _____ Date: _____

I recommend him/her for add/drop of the course/s listed above.

HOD's Signature: _____ Date: _____

National Textile University, Faisalabad

Student's Copy

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