



DARUL HUDA ISLAMIC UNIVERSITY

Hidaya Nagar, Chemmad, Tirurangadi
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OFFICE OF POST GRADUATE INSTITUTE

APPLICATION FOR DEPARTMENT CHANGING - PG

PG Enrl. No.		Name
UG Institution		
Degree Exam Reg No.		Degree Rank
Allotted Department		
Allotted Option		Allotted Course Mode
Preferring Department 1		
Preferring Department 2		
Preferring Department 3		
Preferring Course Mode		

Reason for Changing

I humbly request to concerned authority for changing my allotted department to one of the preferring departments

Name and Sign of the applicant

Date:

<i>Leaving Approved by</i>	Name & Sign of HoD	Name & Sign of Kulliyah Dean	
<i>Admission Approved by</i>	Name & Sign of Concerned HoD	Name & Sign of Concerned Kulliyah Dean	PG Dean

For Office Use Only

Received by		Date	
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Remarks