Office of the Registrar
UNIVERSITY OF LIBERAL ARTS BANGLADESH

Drop/Withdrawal Application Form

Date:

Additional Registrar/Registrar
University of Liberal Arts Bangladesh (ULAB)
Mohammadpur, Dhaka

Subject: ☐ **Application to drop/withdraw the following course(s):**

SL	Course Code	Course Title	Term Name	Credits
1				
2				
3				

Or,

Subject: ☐ **Application to drop/withdraw the full term:**

Term Name:

Dear Sir,
This is to inform you that I am a student of the _____ Program and I want to drop/withdraw the above-mentioned course(s)/term. My details are as follows;

Student name	ID	Cell#

Reason for Course/Term Drop/ Withdrawal

Please take necessary measures to drop/withdraw the course(s)/term.

Thank You.

_____
Student's signature

Course Teacher's Endorsement:

Faculty name	Department	Comments with signature

Note: ***Once a course is withdrawn, it cannot be restored**
***No discount/waiver is applicable on a retake course**

For office use only

Drop/withdraw with: **Approved by:**

Officer/Sr. Officer/Jr. Assist Registrar **Additional Registrar**