



MINHAJ UNIVERSITY LAHORE

Last Updated: 22-12-2022

Application for Change of Section/Shift

Applicant's Information			
Name:			
School/Department:		Section:	
Registration No.:		Session:	
Contact Number:		Email:	
Change Type:	<input type="checkbox"/> Change of Shift <input type="checkbox"/> Change of Section From: _____ To: _____ Courses (For Liberal Arts): _____		
Reason for Switching:	_____ _____		
I have carefully read and understood the instructions / policy guidelines printed overleaf. In case of not complying with /violating the policy/guidelines, I will be responsible for any consequence(s). Applicant's Signature: _____ Date: _____			

Note: Signatures must be same as that on the CNIC. Please attach copy of CNIC, supporting documents and payment proof.

(For Office Use Only)

Remarks by DSA:	_____ _____ _____ Signature & Date _____
Remarks by HOD: (When required)	_____ _____ _____ Signature & Date _____
Remarks by DSA: (For Approval)	_____ _____ Signature & Date _____
Approval by Competent Authority:	_____ Signature & Date _____

For additional remarks, use the backside of the form.

Instructions / Policy Guidelines (For Change of Shift):

1. Application for *Change of shift/Section* will be entertained within the stipulated time as mentioned in the academic calendar.
2. Late submissions shall NOT be entertained.
3. The student can request for *Change of shift/Section* only ONCE in a semester.
4. *Change of shift/Section* may be allowed subject to the following ONLY:
 - a. If the enrolled program/course(s) is being offered in the requested shift with same requirements e.g. Cr. Hrs., course contents etc. The student is responsible to verify these requirements from the concerned HOD.
 - b. If this change doesn't affect the minimum required class strength.
5. The processing fee is non-refundable if the application is rejected.

Applicant's signatures and date: _____

Additional Remarks (For office use ONLY)