|  |  |
| --- | --- |
|  | **Hkkjrh; izkS|ksfxdh laLFkku dkuiqj** |
| **INDIAN INSTITUTE OF TECHNOLOGY KANPUR** |
| **dk;kZy;] vkmVjhp xfrfof/k;kWa (bZ**&**LukrdksRrj)** |
| **OFFICE OF OUTREACH ACTIVITIES (eMasters)** |

**REQUEST FOR CHANGE FROM 'I' GRADE TO LETTER GRADE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Academic Session:** |  | **Quarter:** |  |

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Roll no:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Programme:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Department:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Year:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cellphone No:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email ID:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**No. of Completed Modules: \_\_\_\_\_\_\_\_\_\_\_\_\_ No. of Incomplete Modules: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Undertaking and details of ‘I’ Grade Module and Quarter:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **STUDENT UNDERTAKING** | | | | | |
| **Student Consent\*** | Appearing before the modules are on offer# | | | |  |
| Not appearing in the upcoming quarter examination when the modules are on offer# | | | |  |
| **Sl No.** | **Module No.** | **Module Name** | **Nature\*\*** | **Year/Quarter**  **(when registered for the module)** | **Year/Quarter**  **(when writing the exam)** |
|  |  |  | COR/ELE |  |  |
|  |  |  | COR/ELE |  |  |
|  |  |  | COR/ELE |  |  |

\*Please put a tick (✓) in the respective check box.

\*\*Please write COR for Core/Compulsory & ELE for Elective as appropriate.

#**Please attach the instructor-in-charge/ instructor’s approval with your request**.

Date: Student’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Recommendation of DOPC**    **Signature of DOPC** | |
| **FOR OFFICE USE ONLY** | |
| **Remarks:** | |
| **Checked by**    **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature of Dealing Assistant** | **Approved by**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature of SOPC** |

**Note**: This request should be made to the Office of Digital Learning (dloffice@iitk.ac.in) within two weeks of the commencement of the class of the quarter in which s/he wants to write the examination.