



भारतीय प्रौद्योगिकी संस्थान कानपुर
INDIAN INSTITUTE OF TECHNOLOGY KANPUR
कार्यालय, आउटरीच गतिविधियों (ई-स्नातकोत्तर)
OFFICE OF OUTREACH ACTIVITIES (eMasters)

APPLICATION FOR FEE WAIVER OF REPEATED/SUBSTITUTED MODULE

Academic Session:	Quarter:
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Name: _____ **Roll no:** _____

Program: _____ **Department:** _____

Cellphone No: _____ **Email ID:** _____

No. of Completed Modules: _____ **CPI till date:** _____

(Upload a copy of the last grade sheet)

Details of Repeated/Substituted modules with grades

Module Details				Previous Grade Details		Current Grade Details		
SI No	Module No.	Module Name	Nature*	Quarter	Grade	Taken as ⁺	Quarter	Grade
			COR/ELE			REP/SUB		
			COR/ELE			REP/SUB		
			COR/ELE			REP/SUB		
Request of Fee waiver[§] made for (specify the module no.)							Module No.	

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

+ Please write REP for Repeat/ SUB for Substitute as appropriate.

§ Please note that the fee waiver is applied for only one repeated/substituted module. Students are requested to submit such request during preregistration of their last quarter of the programme.

Date: _____

Signature of Student: _____

Recommendation of DOPC <div style="text-align: right; margin-top: 20px;"> _____ Signature of DOPC </div>	
FOR OFFICE USE ONLY	
Remarks:	
Checked by <div style="text-align: center; margin-top: 20px;"> _____ Signature of Dealing Assistant </div>	Approved by <div style="text-align: center; margin-top: 20px;"> _____ Signature of PIC (OOA) </div>