

Change of Subject Form

SCIENCE FACULTY

Date : / /20

Name _____ Class _____ Roll No. _____

To,
The Principal,
MES' Abasaheb Garware College,
Pune - 411004

I request you to grant me a change in my subjects.

Subjects before change	Subjects after change
1) _____	1) _____
2) _____	2) _____
3) _____	3) _____
4) _____	4) _____

Yours faithfully,

Signature of Student

Recommendation : The candidate is allowed / not allowed to change his / her subject(s)

Signature of the teacher
teaching the old subject

Signature of the teacher
teaching the new subject

Signature of the Clerk

Signature of Principal / Vice-Principal