

IBA Institute of Business Administration
Karachi
(EVENING PROGRAMME)

Date: _____

APPLICATION FOR WIDTHRAWAL FROM A COURSE

The Director
Institute of Business Administration
Karachi

Sir

Kindly allow me to withdraw from _____
Course

Your sincerely

Signature _____

Name _____

Regn No. _____

He/She has accumulated _____ absences till date.
(To be filled in by the Instructor)

Instructor's signature
with date

Withdrawal allowed

DIRECTOR