INSTITUTE OF BUSINESS ADMINISTRATION (EVENING PROGRAMME)

		Dated:
APPLICATION FROM WITHDE	RAWAL FROM	I A COURSE
The Director nstitute of Business Administration Karachi		
Sir		
Kindly allow me to Withdrawal fourse.	from	
		Your sincerely
	Signature_	
	Name	
	Regn. No	(In block Letters)
He/ She has accumulated(To be filled by the I		date.
		Instructor's Signature With Date
Withdrawa	al allowed	
Dia	rector	
	Date	:
INFORMATION TO THE INSTRUCTOR Mr./ Mrs		has withdrawal from the