

UNIVERSITY OF ENGINEERING AND TECHNOLOGY TAXILA

APPLICATION FORM FOR FREEZING OF SEMESTER

(To be submitted to the Chairman of Concerned Department)

Department: _____

Application for Freezing of: (Tick Appropriate Box below)

- One Semester (Fall/Spring _____) Two Semesters (Fall/Spring _____ & Fall/Spring _____)

STUDENT'S PARTICULARS

1. Student's Name: _____ 2. Regd. No. _____
(As per Matric Certificate - IN BLOCK LETTERS)

3. Father's Name: _____ 4. Student's CNIC No: _____
(IN BLOCK LETTERS WITH CONTACT NO.)

5. Address: _____

6. Reason(s) for Requesting Semester(s) Freeze (Please Attach Photocopies of Supporting Documents, if any): _____

Name and Signature of Father/Guardian
(Attach CNIC photocopy)

Signature of the Student

FOR OFFICIAL USE ONLY

Case No: _____
(To be entered by Chairman's Office)

Dated: _____

RECOMMENDATIONS OF DEPARTMENTAL SEMESTER COMMITTEE

Observations (if any) / Recommendations: _____

a. Member 1: _____
(Name and Signature)

b. Member 2: _____
(Name and Signature)

c. Member 3: _____
(Name and Signature)

d. Chairman: _____
(Signatures with Stamp)

DEAN OF FACULTY

APPROVED / NOT APPROVED

Dated: _____

(Signatures with Stamp)

Forwarded to the **Controller of Examinations** for Notification.

UNIVERSITY RULES GOVERNING FREEZING OF SEMESTER(S)

1. Students will be allowed to freeze a semester only once during the entire degree program owing to some extreme and genuine reason to be determined by the Departmental Semester Committee.
2. Students shall not be allowed to freeze their First and Second Semester(s), in any circumstances. Only those students who have completed their First Academic Year at the University shall be eligible to avail this facility.
3. A student must apply to the Chairman of the Department, in writing, for freezing of one or two consecutive semesters within fifteen days of commencement of the semester. Students can request for freezing of at most two (02) consecutive semesters with Summer Semester not being counted.
4. The Dean of the concerned faculty will approve the request on the recommendation of the Departmental Semester Committee and the Controller of Examinations shall notify the Freezing of Semester(s) accordingly.
5. In case of freezing two consecutive semesters, the student (on his return) will be re-registered in the same semester with next junior class and his courses shall be evaluated by the concerned Chairman of the department to determine their relevance to the changes made in the curriculum (if any). In such a case, the student shall be required to modify the degree plan to ensure conformity to the recent curriculum. Also, students will be required to pay the difference of University fee (if any) besides the re-registration fee.
6. In case of freezing one semester, the student may re-join his own class. The deficiency created by frozen semester shall be made up after completing the remaining courses with his class i.e. after eighth semester by enrolling as a Casual Student.
7. The maximum duration of the degree program shall remain the same which will be considered from the date of his first semester registration including the frozen semesters.
8. Regular semester fee shall be charged for frozen semester(s).