



बिरला प्रौद्योगिकी संस्थान
BIRLA INSTITUTE OF TECHNOLOGY
(वि० अमु० आ० अधिनियम १९५६ की धारा ३ के तहत मन्त्रि विवि विद्यालय | A Deemed to be University u/s 3 of UGC Act, 1956)
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To

Date: _____

The Director (Incharge)

BITOC, Lalpur

Through: Academic Coordinator, Dept. of

Subject: Rearrangement of Classes (Theory/Lab) from _____ to _____

Dear Sir/Madam,

This is to bring in your kind notice that my classes will be engaged by the following faculty member during my absence.

Sl. No.	Date	Time	Room No.	Name of the Scheduled Theory/Lab	Name of the Theory/Lab to be taken	Name & Signature of the concerned Teacher who will engage the class

Recommended/Not Recommended

(Name & Signature of the Teacher)

(Signature of the Academic Coordinator)