



Lecture / Lab Classes Rearrangement

Date: _____

To

Dean (UGS) / Dean (PGS)
BIT Mesra

Through: The Head of the Department of _____

Subject: Rearrangement of classes / labs from _____ to _____

Dear Sir / Madam

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

S. No	Date	Scheduled Class Time	Room No	Name of the scheduled theory / lab class	Name of the class to be taken after rearrangement	Name of the concerned faculty who will engage the class	Name & Signature of approval of the concerned faculty
1							
2							
3							
4							

Name and Signature of the faculty

Remarks of HoD

Signature of HoD