 **UBDSBE DISCOVERY YEAR PLACEMENT - APPEAL REQUEST FORM**

SBE

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request of DY Placement Semester: August / January, 201\_\_ CGPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reasons for request to change of DY Activity placement:

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Student’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Nominated DY Activity** | **Placement** | **Request to Change to** |
| Student Abroad Programme (SAP) |  |  |
| Internship |  |  |
| Community Outreach Programme (COP) |  |  |
| Incubation |  |  |
| Agreed & signed by DY Coordinator of respective activity |  |  |

**Reminder to student:**

**This is a request and not entitlement for students to change their DY activity. In case there is no available placement, students will have to accept DY committee’s nomination.**

*Together with this form,* ***enclose student transcript*** *and submit this form to the DY Coordinator of the requested activity.*