



# ERODE SENGUNTHAR ENGINEERING COLLEGE

(An Autonomous Institution, Affiliated to Anna University)

PERUNDURAI, ERODE-638 057

OFFICE OF THE CONTROLLER OF EXAMINATIONS

## APPLICATION FOR AUTHORISED BREAK OF STUDY



Date :

Register No.	:	
Name of the Student	:	
Programme/Branch	:	
Month & Year of Admission	:	
Semester Completed	:	
Last Exam appeared (Month & Year) Semester	:	
Semester, Duration & Period for which the Break of Study is sought for	:	
Reason for the Break of Study (Proof to be attached)	:	
List of Arrears as on date (Course Codes)	:	

(Signature of the Parent)

(Signature of the Student)

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### NOTE:

- *Application should reach Principal's office not later than the last date of registering for the semester examination.*
- *Before applying to the break of study refer to the regulations of the programme.*
- *After Readmission, the current Regulations is applicable.*

**CLASS ADVISOR**

**HEAD OF THE DEPARTMENT**

**PRINCIPAL**

Submitted to: The Controller of Examinations

Copy to  
1. Administrative Manager  
2. Head of the Department  
3. The Student