**St Xavier’s College (Autonomous), Ahmedabad-09**

**Subject Change Request Form**

**Academic Year 2024-2025**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | | Surname | | | Middle Name |
|  | |  | | |  |
| Roll Number | |  | | | |
| Stream | BSc | | |  | |
| Semester | V | | |  | |
| Existing subjects of **SEM IV** |  | | | | |
| Change of Subject requested |  | | | | |
| Do you have ATKT in previous semesters**?** | YES NO | | | | |
| If yes, please mention the ATKTs, paper numbers and the Semesters |  | | | | |
| Signature of Student | | | Signature of Parent | | |

**PS: Important Instructions:**

1. Submission of an application does not guarantee the change requested.

2. No subject changes allowed in BA SEM III, V & BSC SEM-III.

3. Factors like availability of seats, batch size, student’s performance in earlier Semesters, merit, etc need to be considered.

4. The last date for submission of applications is **25-06-2024**. Kindly download type / handwrite the fields, scan the same and send it to [**subjectchange@sxca.edu.in**](mailto:subjectchange@sxca.edu.in)

**5. No other form of request other than this will be entertained.**