



Centurion
UNIVERSITY
*Shaping Lives...
Empowering Communities...*

CENTURION UNIVERSITY OF TECHNOLOGY AND MANAGEMENT

ODISHA

1. Name:
2. Registration No.:
3. School/Department:
4. Campus:
5. Reasons for deferment (Put ✓ mark)
 - a. Personal
 - b. Medical
6. Total duration of deferment
 - a. Duration (One year/ Two years):
 - b. Deferment date starts on:
 - c. Re-join date:

Signature of the Scholar

Recommended by:

Approved/Not Approved by Vice Chancellor

Signature of Vice Chancellor