

STUDENT WITHDRAWAL OF STUDIES FORM (College of Graduate Studies)

APPLICANT DETAILS	;	
Name		
Student ID		
Programme		
IC/PassportNo.		
Address		
Email Address		
Handphone No.		
REASONS OF WITHD	DRAWAL	
"I would withdraw my	y studies because of	the following reason/s:
Student Signature		Date
IMPORTANT NOTES	ON REFUND POLI	CY
Kindly note that that t	the refund of tuition	n fees for a <u>normal semester</u> will based on the following table:
REFUN		Structure A & B &C
PORTIC		Shutther & b &c
Full refun)-7 days after commencement of the semester
2/3 refur		-14 days after commencement of the semester
No refun		After 14 days
*Kindly refer UNITEN		Student > Academic Calendar & Important Dates for details ules and Regulation Apply

FOR INTERNATIONAL STUDENT ONLY:				
REVIEW FROM INTERNATIONAL OFFICE (Kindly tick /) Remarks				
() Student Pass expiry date :	() Currently, IO extending student pass			
() Passport validity :	() Student pass can renew 3 months within return of student			
() Passport validity less than 1 year :	() Currently, IO doing Special Pass for student			
() Student Pass validity less 6 months :	() Currently student renewing / extending validity			
() Student Pass has expired	() Currently, student has prepared documents for visa cancellation / Shorten and will submit to IO			
() Currently student is overstaying	() Others :			

Date

Recommended / Not Recommended

Checked by:

International Office	
Executive	

COGS ADMIN USE Effective Date **Student Status** Date: Debt Yes : RM _____ No **Refund of Tuition Fee** Full Refund. Not 2/3 refund No Refund Applicable RM Approved /Disapproved by: Checked by : Recommended/ Not Recommended by: Admin. Assistant **Admin Executive COGS Deputy Dean COGS Admin COGS Admin Office** Admin Office Office Letter of withdrawal issued on