

Form

## Name: Course Withdrawal Application

This form is used when a student would like to withdraw from their course/s. This application will be assessed by the authorised officer considering factors such as satisfactory course progress and any outstanding fees.

Section 1: PERSONAL	DETAILS	
Student Name (as seen on the passport)		UE ID:
Address:		Post Code:
Home Phone:		Mobile No:
Email:		

Section 2: COURSE DETAILS (please list all courses you wish to withdraw from)							
Start Date:	End Date:						
Start Date:	End Date:						
Start Date:	End Date:						
	Start Date: Start Date:						

## Section 3: Reason for Withdrawal

Please explain why you no longer want to study your course/s.

## Section 4: DOCUMENTATION

Please provide supporting evidence ( if any )

## **Section 5: Declaration**

I understand that:

- This application will be reviewed by UE and does not guarantee an approval to withdraw. I am expected to continue my studies at UE until I receive the outcome of this application.
- This is a request to leave UE for the reasons stated above and understand that if it is approved, I will no longer be enrolled as a student at UE.
- If this application is approved, UE will inform DHA of my withdrawal and I understand the implications for my student visa (if applicable).
- I am entitled to a Statement of Attainment for the Units of Competency for which I have been assessed as Competent if I have paid all fees relating to the units (including material fees, etc.)
- My withdrawal will be denied if I have not paid all outstanding fees.

Student Signature:	Date:	
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Section A: Office Use Only						
Accounts Department						
Accounts Officer Name:		Signature and Date:		Amount Owing:		
Outcome:	Reason/s:					
Approved Denied	(Note: Assessment must only be done by a Manager)					
Admissions Department						
Assessed by:			Signature and Date:			
Processed By:			Signature and Date:			