

CENTRE FOR GRADUATE STUDIES UNIVERSITI TUN HUSSEIN ONN MALAYSIA WITHDRAWAL FROM ACADEMIC ENROLLMENT

Dean,

Centre for Graduate Studies, Universiti Tun Hussein Onn Malaysia, 86400 Parit Raja, Batu Pahat, Johor Darul Ta'zim

Dear Professor, WITHDRAWAL FROM ACADEMIC ENROLLMENT

Notice of Withdrawal from Postgraduate Study for Semester _____, Session ______ is hereby submitted. The requisite actions have been duly fulfilled as per the stipulated requirements.

SECTION A: STUDENT'S PERSONAL DETAILS

NRIC / PASSPORT NUMBER	:]
MATRICULATION NUMBER	:							
FULL NAME	:							i
FACULTY	:							
ACADEMIC PROGRAMME	:							

SECTION B: WITHDRAWAL JUSTIFICATIONS

The application for the withdrawal of the study is hereby submitted due to the following reasons.



SECTION C: WITHDRAWAL REQUIREMENTS								
ACTION	APPROVAL	COMMENTS / REMARKS						
All items and equipment had been returned to respective faculty	Academic Advisor							
Room keys had been returned to Student Residential Office	Student Residential Office							
Sports equipment had been return to the Sport Centre	UTHM Sport Centre							
All the due payment had been resolved	UTHM Bursary							
All loaned books had been returned to UTHM Library.	UTHM Library							
Student Identification Card had been return to CGS	Centre for Graduate Studies							
Visa cancellation and return of student pass	UTHM International Office							

Yours sincerely,

STUDENT'S SIGNATURE	_
NAME	:
CORRESPONDENCE ADDRESS	:
PHONE NUMBER	:



SECTION D: OFFICE USE ONLY

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APPROVAL LETTER

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UPDATED STUDENT'S RECORD IN SMP OFFICAL STAMP AND INITIALS