



APPLICATION TO WITHDRAW STUDIES (LOCAL STUDENT)

APPLICANT DETAILS														
Name														
IC No.														
Student ID														
Programme														
Sponsor														
Email														
Handphone No.														
REASONS OF WITHDRAWAL														
<p><i>I decide to withdraw from my studies because of the following reason/s:</i></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>														
<hr style="width: 80%; margin-left: 0;"/> <p style="text-align: center;">Applicant Signature</p>	<hr style="width: 80%; margin-left: 0;"/> <p style="text-align: center;">Date</p>													
IMPORTANT NOTES ON REFUND POLICY														
<p>Kindly note that that the refund of tuition fees for a <u>normal semester</u> will based on the following table:</p>														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="padding: 5px;">REFUND PORTION</th> <th style="padding: 5px;">FOUNDATION DROP PERIOD</th> <th style="padding: 5px;">DEGREE & DIPLOMA DROP PERIOD</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Full refund</td> <td style="padding: 5px;">0-3 days after commencement of the semester</td> <td style="padding: 5px;">0-7 days after commencement of the semester</td> </tr> <tr> <td style="padding: 5px;">2/3 refund</td> <td style="padding: 5px;">4-5 days after commencement of the semester</td> <td style="padding: 5px;">8-14 days after commencement of the semester</td> </tr> <tr> <td style="padding: 5px;">No refund</td> <td style="padding: 5px;">After 5 days</td> <td style="padding: 5px;">After 14 days</td> </tr> </tbody> </table>	REFUND PORTION	FOUNDATION DROP PERIOD	DEGREE & DIPLOMA DROP PERIOD	Full refund	0-3 days after commencement of the semester	0-7 days after commencement of the semester	2/3 refund	4-5 days after commencement of the semester	8-14 days after commencement of the semester	No refund	After 5 days	After 14 days		
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No refund	After 5 days	After 14 days												
<p><small>*Kindly refer UNITEN Website > Current Student > Academic Calendar & Important Dates for details</small></p>														

****Please submit the completed form to Registrar Counter, UNITEN Customer Centre (UCC), Admin Building or email enrol@uniten.edu.my***

Review from College Head of Department / Deputy Dean Academic

Review/Comment:

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Signature:
Name & Official Stamp

Date:

**Review from Executive Financial Assistance Unit Student Affairs Department
(Only for Sponsored students)**

Review/Comment:

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Signature:
Name & Official Stamp

Date:

REGISTRAR'S OFFICE USE

Effective Date		
Student Status		
Outstanding Debt	<input type="checkbox"/> Yes: RM _____	<input type="checkbox"/> No
Refund of Tuition Fee	<input type="checkbox"/> Full Refund	<input type="checkbox"/> 2/3 Refund
	<input type="checkbox"/> No Refund	<input type="checkbox"/> Not Applicable
Checked by:	Recommended/Not Recommended by:	Approved/Not Approved by:
Signature: Admin. Assistant (Enrolment) Registrar Office	Signature: Assistant Registrar (Enrolment) Registrar Office	Signature: Deputy Registrar (Enrolment) Registrar Office
Date:	Date:	Date:
Letter of withdrawal issued on:		