



PROVISIONAL COURSE WITHDRAWAL FORM

DIN: RUW-OR/W-T-001

RN: 02

ED: 07/07/2020

Please note: ☞ This form must be submitted to the Registrar's Office **before the withdrawal deadline.**

☞ There will be no refund of fees for course withdrawals (*refer to the refund policy*) after the Add/Drop period has elapsed.

Student's name: _____ I.D. No.: _____

College: _____ Programme: _____

Academic year: ____ / ____ Semester: 1ST 2ND SUMMER

I wish to withdraw from the following course(s) only:

	Course code	Section	Course title
E.g.	B U S 4 0 5	0 1	Commercial Bank Management
1.			
2.			
3.			
4.			
5.			

- I hereby declare I have understood that, upon acceptance of this withdrawal request, the refund detailed below apply*.

Withdrawal dates from the University	Refund % given
One week before the first day of classes	100% of total Tuition Fee only
Before the end of the first week of classes	100% of total Tuition Fee only
Before the end of the second week of classes	50% of total Tuition Fee only
Before the end of the third week of classes	25% of total Tuition Fee only
After the third week of classes	0% of total Tuition Fee only

***Note: Above table of refund weeks is not applicable to summer semesters.**

Student: _____ / ____ / 20____
Name (print) Signature Date (DD/MM/YYYY)

Note: the above request shall only be approved upon the approval and confirmation of the sponsoring organization (if any).



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Curriculum Advisor:

(Of the withdrawn course/s)

Name (print)

Signature

_____/_____/20
Date (DD/MM/YYYY)

Dean/Director:

(Students' College)

Name (print)

Signature

_____/_____/20
Date (DD/M/YYYY)

Finance Officer:

PROCESSED

Name (print)

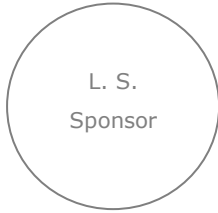
Signature

_____/_____/20
Date (DD/MM/YYYY)

Sponsor (if applicable)

APPROVED

REJECTED



Organization/Institution name: _____

Name of person responsible (print)

Signature

_____/_____/20
Date (DD/MM/YYYY)

Registrar:

Name (print)

Signature

_____/_____/20
Date (DD/MM/YYYY)