



UNIVERSITI KUALA LUMPUR

REQUEST TO WITHDRAW FROM STUDY

UniKL/AcMD/SOP07/FOR/02

Note: Student must complete Section A, B and C before meeting Academic Advisor

SECTION A : STUDENT'S INFORMATION

Name : _____ ID : _____

IC/ Passport : _____ Contact No: _____

Programme : _____

Institute : _____ Email address: _____

Correspondence: _____

Address _____ This address is the same as in our record: Yes No

If you change your address during the period of deferment, please contact us to ensure your address details are updated for future correspondence.

1. Reason to withdraw from study:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(12) Health Problem
(15) Personal Problem
(11) Job Offer

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(26) Financial Problem
(13) Study Offer from Other University
Others _____

2. To be completed by Finance Department:

Current Outstanding Debts: RM _____ as at (date) _____ Signed _____.

SECTION B – APPLICATION DETAILS

1. I would like to discontinue my study with effect from (date) _____

SECTION C – STUDENT'S DECLARATION

1. I declare that the information supplied in this form and the information given in support of my application is correct and complete.

2. I **agree** to withdraw any assessment submitted to the lecturers, and no grades shall be awarded for the subjects attended until the point of my withdrawal effective date (if withdrawal after week 9)

Circle		Initial
Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

Student's Signature: _____ **Date:** _____

Note: Kindly attach supporting letter or document. *Please circle where applicable

For clause (2) - Student is given option to have their marks be processed if quit after week 9. Grade 'W' is given if withdrawn within week 5-9. If NO, student status should only be updated after provisional result released (after results have been processed).

SECTION D : FOR ACADEMIC ADVISOR'S RECOMMENDATION:

Signature : _____ Date : _____

For UniKL Use Only

Kindly ensure all information are provided and completed before approving this application especially Section A – C. Section D can be completed by Counselor/ authorised person by the Institute in the absence of Academic Advisor.

SECTION E Dean's Approval

Approve Not Approve

Dean's Signature & Official Stamp Date: _____

SECTION F Academic Services (Enrolment and Records)

Received Date : _____

	Process Checklist	Date	Sign
1	Drop/Withdraw all subjects		
2	Change Status		
3	End from the Academic Advisor's list		
4	Send approval Letter		