



STUDY WITHDRAWAL FORM

STUDENT INSTRUCTION:

- Student must obtain remark from each department before submit to the Academic Office.

Name : _____ Student ID : _____
IC / Passport : _____ Phone : _____
Correspondence : _____
Address : _____

INFORMATION

Programme : _____ Intake : _____
Current Semester : _____ Sponsor : _____
Reason(s) for Withdrawal :

☐ Financial problem

☐ Transferring to another institution

☐ Medical problem

☐ Personal problem

☐ Others

Please specify :

Plan for readmission? ☐ Yes ☐ No If Yes, when? _____

I understand that, even though I am withdrawing from UIM, I am responsible for all outstanding financial obligations to the University.

Remarks from Head of School

Note (if any):

Date : _____ Signature & Stamp : _____

Remarks from Main Supervisor

Note (if any):

Date : _____ Signature & Stamp : _____

Remarks from Administration Office

Note (if any):

Date : _____

Signature & Stamp : _____

Remarks from Library

Note (if any):

Date : _____

Signature & Stamp : _____

Remarks from Finance Department

Note (if any):

Balance carried forward from last semester : _____

Current Semester / Term Fees

Total outstanding to date : _____

Refundable Deposit

Tuition fees refundable : _____

Balance to be settled : _____

Date : _____

Signature & Stamp : _____

Remarks from Vice President Academic

Withdrawal Status : APPROVED/ NOT APPROVED

Date : _____

Signature & Stamp : _____

Remarks from Academic Office

Withdrawal Status : COMPLETE/ NOT COMPLETE

Date : _____

Signature & Stamp : _____