

RESUMPTION OF STUDY REQUEST FORM

Please **PRINT (WRITE IN CAPITAL LETTERS)** the required information clearly.

SECTION A: PERSONAL DETAILS			
			ID NUMBER: <input style="width: 150px;" type="text"/>
TITLE:	FIRST NAME:	MIDDLE NAME:	LAST NAME:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Telephone: _____ Mobile: _____ Email: _____			
Are you sponsored or private? <input type="checkbox"/> Private <input type="checkbox"/> Sponsored Name of Sponsor: _____			

SECTION B: STUDY DISRUPTION INFORMATION	
Course:	<input style="width: 90%;" type="text"/>
Study period you left:	<input style="width: 150px;" type="text"/> Year <input style="width: 50px;" type="text"/>
a) STUDY DISCONTINUE/UNITS WITHDRAWAL	
1. Did you submitted request for Study Discontinued/Units Withdrawal or Leave of Absence (LOA) to SAS or Faculty: <input type="checkbox"/> YES <input type="checkbox"/> NO Go to 3.	
2. Did you get Study Discontinue/Units Withdrawal or LOA approval?: <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes: Approval date: _____ Approval letter reference: _____ <input type="checkbox"/> Discontinue/Withdrawal <input type="checkbox"/> LOA	
If no: Explain why you did not get approval: _____ _____ _____	
3. Give reasons why you left without approval of Study Discontinue/Units Withdrawal or LOA. Attached supporting documents. _____ _____ _____	

b) DISMISSALS

1. Were you discontinued from study due to dismissals – attached copy of dismissal document(s):
 - i. Unsatisfactory academic performance Termination Suspension
 - ii. Disciplinary issues Termination Suspension
2. Did you completed dismissal requirements? Yes No Go to 3.
3. Give reasons why you want to resume studies when you did not meet dismissal requirements? Attached documents.

SECTION C: RESUMPTION OF STUDY REQUEST

Study period you request to resume study: Year

I declare that the provided information and attached documents are true.

Signature: _____

Date: _____

SECTION D: FACULTY DEAN/DIRECTOR/MANAGER (OFFICAL USE ONLY)

Approve Disapprove Pending

Comment:

Name: _____

Signature: _____

Date: _____

SECTION E: STUDENT ACADEMIC SERVICES - REGISTRAR/PASO (OFFICIAL USE ONLY)

Enrolment approve Enrolment denied Pending – Required conditions has to be met prior to enrolment

Name: _____

Signature: _____

Date: _____

SECTION F: STUDENT ACADEMIC SERVICES – ADMISSION & ENROLMENT UNIT (OFFICIAL USE ONLY)

Enrolment of unit(s) completed as per Enrolment procedure.

SAS Officer: _____

Signature: _____

Date: _____