



**Universiti Tunku Abdul Rahman**  
**Department of Admissions and Credit Evaluation**  
 PO Box 11384, 50744 Kuala Lumpur

## **NOTIFICATION TO WITHDRAW FROM THE UNIVERSITY**

I shall be withdrawing from the course of study in the University with effect from the date this letter is received by the University. I append below my particulars for your reference:

Name: \_\_\_\_\_ Registration No.: \_\_\_\_\_

IC No.: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Level of Study: \_\_\_\_\_

Current Trimester and Year of Study: \_\_\_\_\_

Reason(s) for withdrawing: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Returned herewith is the Student ID for your necessary action.

Yours faithfully

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

### **For Office Use Only**

#### **A. Institute of Postgraduate Studies/Faculty/Centre for Foundation General Office**

Date Received: \_\_\_\_\_ In Order: \_\_\_\_\_

Signature: \_\_\_\_\_

#### **B. Approved / Not Approved by Dean of Faculty /Director of Centre**

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### **C. Department of Admissions and Credit Evaluation**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Action Taken By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_