

RF05

Workstation: AMAD Version: 01 Revision: 02 Effective Date: 03/01/2023

APPLICATION FOR WITHDRAWAL FROM UNIVERSITY

FORM W1

Applicants should meet with the Dean/Deputy Dean of Student Affairs for counselling/interview before filling in this form (Form W1).

A. PERSONAL PARTICULARS

Signature & Official Stamp

Name:						
Matric No: Programme:					Level of Study:	
Current CGPA:	Current Co	ourses Registered:	Correspondence Address			
	1.	5.				
	1.				Talanhawa Na	
	2.	6.			Telephone No	
Cumulative Credit Hours Earned:	3.	7.			Permanent Address	
Hours Larnea.	4.	8.			Telephone No.	
REASON(S) FOR	WITHDR AW AI	•			·	
No. Reasons	VIIIIDK/IW/IL	. Tick (/)	No.	Reasons		Tick (
1. Loss interest	İ		2.	Financial	Problem	1
3. Family prob	lem		4.	Change u	Change university	
5. Married			6.		Medical/health problem (mental)	
7. Personal Pro	blem		8.	Cannot complete language req.		
0.1					simplete language req.	1
B. DECLARATION		eated in this application	1			hat if at a
B. DECLARATION declare that all the ime the information his application or read	e information st n stated in this de terminate my sta lmission after wi	eclaration is found cor	n form ntrary i	i s true an to facts, the ional Islam	d correct. I understand to University has the right to tic University, Malaysia a	to disqual nd that a
3. DECLARATION declare that all the ime the information his application or	e information st n stated in this de terminate my sta lmission after wi	eclaration is found cor utus as a student of In	n form ntrary i	i s true an to facts, the ional Islam	d correct. I understand to the University has the right t	to disqual nd that a
B. DECLARATION declare that all the ime the information his application or application for read Applicant's	e information stated in this de terminate my sta Imission after wi	eclaration is found cor utus as a student of In	n form ntrary i nternati onside	is true and to facts, the ional Islam cred.	d correct. I understand to University has the right to tic University, Malaysia a	to disqual nd that a
Applicant's C. KULLIYYAH All certify that the students of the second s	e information stated in this determinate my stated in this determinate my state with the state of the state o	eclaration is found contus as a student of Inithdrawal will not be contusted by the contust of t	n form ntrary i nternate onside	is true and to facts, the ional Islam ered. FFAIRS) ulliyyah lev	d correct. I understand to University has the right to tic University, Malaysia a	to disqual nd that a te
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FORM W2

PART A: PERSONAL PAR	TICULARS			
NAME :	MA	TRICNO. :		
PROGRAMME :				
SIGNATURE :	DA	TE :		
PART B: PARENT/GUARD	DIAN'S/REFEREE (FOR INTERNATIONAL STUD	DENTS) CONSENT		
I hereby give my consent to th	he application of the above-named and would bear all c	consequences.		
NAME OF PARENT/GUARDIAN	N/REFEREE:			
SIGNATURE :	DA	DATE :		
PART C: FOR DEAN'S /K				
APPROVED BY:	COMMENTS			
Signature & Official Stamp:				
Date:				
withdrawal letter. * For International Studen ticket and start the visa can	nt – Kindly please consult with the Visa Unit before acelation process.	e purchasing the flight		
	t Only) d the passport for cancellation process of student's pass.	Approved / Disapproved		
Comments:				
Signature & Official Stamp):	Date:		
INSURANCE - STADD (V (for International Student	Approved / Disapproved			
Comments:				
Signature & Official Stamp):	Date:		



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Approved / Disapproved
Date:
Approved / Disapproved
Date:
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Date:
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Date:
Approved / Disapproved
Date:

STUDENT'S COPY AMAD OFFICE USE APPLICATION FOR WITHDRAWAL FROM UNIVERSITY **ONLY** Please allow three (3) working days excluding the application day for processing. Any enquiries, please call the following numbers: 03-6421 6421 ext. 3014. Date of collection:

NAME:

MATRIC NO: