

COURSE TRANSFER / WITHDRAWAL REQUEST

V10.01.01.CTW

STUDENT TO COMPLETE:

Student Name (Full Name in English/Chinese):	FYIT Student Number:
Gender*: M / F	Passport Number:
Nationality:	FIN Number:
Degree / Higher Diploma / English Level *	Tel/HP No.:
I wish to (please tick only option only):	
<input type="checkbox"/> Internal Transfer to another Course _____ (State School name)	
<input type="checkbox"/> External Transfer to other Schools _____ (State School name)	
_____ (Course name)	
<input type="checkbox"/> Withdraw from course and return to home country	
Reasons for Transfer:	
_____ Signature & Date	

FOR SCHOOL USE ONLY:

Interviewed by Student Affairs Officer* Brief summary of points/recommendations:
Signature: _____ Date: _____

FOR SCHOOL USE ONLY:

Interview / Endorsed / Approved* by Dean Brief Summary of Points Raised:
Signature: _____ Date: _____

FOLLOW-UP ACTION:

1. Student Affairs Officer to inform parents/guardians/agents* of student's wish to Transfer / withdraw from course.
2. Student Affairs Officer to fill in Withdrawal Case Log (V10.01.01.WCL) and send copies of this form to Current Dean, Subsequent Dean, as well as to inform student of next stage of interview(s) and/or further counselling if necessary.
3. Student Affairs Officer to advice students to use available procedures for feedback and grievances if necessary.

* Please delete as appropriate.