

\* As this form entails an important decision, we can only accept the paper copy of this form signed by the student himself/herself.

## **Student ONLY:** (This section should be completed by the student)

**Full Name**  
(Based on your passport)

**TUMS Student Number**  **Passport Number**

**Program of Study**  
(Level & Major)

**Last Date of Attendance**  
(Active studies)

I confirm that I have been expelled from **the International Campus (IC)**

I would like someone from the university to contact me to give further information/advice: **YES**  **NO**

**Signature**  **Date**  /  /

## **Office ONLY:** (This section should be completed by the relevant office)

### Reason(s) for Expulsion

- Three (3) consecutive conditional semesters
- Four (4) alternative conditional semesters
- Failing in comprehensive examination
- Long absences from the university
- No registration for the academic semester at the univeristy

**Other Reasons:**

<p><b>Dean of TUMS International College</b></p> <p>Approved <input type="checkbox"/> Disapproved <input type="checkbox"/></p> <p><b>Signature:</b> _____ <b>Date:</b> _____</p>	<p><b>TUMS Int’l Campus, Vice-Dean for Educational Affairs</b></p> <p>Approved <input type="checkbox"/> Disapproved <input type="checkbox"/></p> <p><b>Signature:</b> _____ <b>Date:</b> _____</p>
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