

Your departure will be confirmed upon receipt of a signed paper form or a digital form from your email.

Full Name

(Based on your passport)

TUMS Student Number

Passport Number

Program of Study

(Level & Major)

Last Date of

Attendance

(Active studies)

 / /

Reason for Leaving

Academic
Employment
Financial
Health/Disability

Accepted Another Program
(at TUMS)
Accepted in Another
University

Other Reasons

Please state

**Transfer to Another
University**

Please state which University and which program you are transferring to

I confirm that I am leaving **TUMS International Campus (IC)**

I have obtained the advice/information I need to make this decision:

YES **NO**

I would like someone to contact me to give further information/advice:

YES **NO**

Signature

Date

DD / MM / YY

Dean of TUMS International College

Approved Disapproved

Signature:

Date:

TUMS Int'l Campus, Vice-Dean for Educational Affairs

Approved Disapproved

Signature:

Date: