

School of: Campus:

## **NOTIFICATION OF WITHDRAWAL FROM THE UNIVERSITY** First Name(s): Surname: Student No: Qualification: Postal Address: Cell No: Postal Code: E-mail Address: Telephone No: Reason for withdrawal: Do you have a bursary/loan? YES NO Signature: Student Funding Official If YES - state name of bursary/loan The following must be submitted on withdrawal Tick appropriate box Herewith None issued to me Official Signature Student ID Card All outstanding library books Residence (keys etc) Parking/Access discs for vehicles If you have mislaid your Student ID Card and/or Parking-Access Disc, you are required to fill the following I, ......(Full Name), hereby declare that I am unable to return the ......issued to me by the University and accept full and sole responsibility for the consequences should the University suffer any loss as a result thereof. Student's Signature: -----Date: -----Please note that outstanding fees must be settled immediately after withdrawal. If you have queries about your fees, contact the Fees Office on your campus. Student's Signature: ..... Date: .....