

APPLICATION TO DISCONTINUE STUDY

FOR UUM COLLEGE OF BUSINESS PROGRAMMES

SECTION A: TO BE COMPLETED BY THE STUDENT	
Name:	Matric No:
Programme:	Number of Semester:
Tel. No.:	Address:
E-Mail:	
Structure of Study: * () Coursework () Coursework and Dissertation () Research	Mode of Study: * () Full-Time () Part-Time
Reasons for discontinue (please use additional paper if	necessary):
Signature:	Date:
SECTION B: APPROVAL BY THE DEAN OF OTHMAN YEOP ABDULLAH GRADUATE SCHOOL OF BUSINESS	
() Approved () Disapproved	Signature & Stamp:
	Date:
FOR OFFICE USE ONLY	
Received date:	Signature & Stamp:
Recorded Date:	

^{*} Tick √ wherever appropriate