



THE UNIVERSITY OF THE WEST INDIES
ST. AUGUSTINE CAMPUS, TRINIDAD & TOBAGO, WEST INDIES

STUDENT WITHDRAWAL FORM

This form should be submitted to the Student Affairs (Admissions) Office OR Office of Graduate Studies & Research as applicable. Caution Money is normally refunded three (3) months after your withdrawal from The University on submission of the completed Application for Refund of Caution Money Form.

_____ UWI Student Identification Number

PLEASE COMPLETE THIS FORM IN DUPLICATE

Name of Student:

	Surname	Middle Name	First Name
<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Post Graduate		

Faculty/School :

Programme:

<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Evening	<input type="checkbox"/> Specially Admitted	<input type="checkbox"/> Occasional
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Address (while at UWI):

Permanent/ Mailing Address:

Telephone Contact:

Non-UWI email

Withdrawal with effect from: Semester I Semester II Academic Year 20____ / 20____

Reason for withdrawal: Personal Work-Related Medical Financial

Transferring to/ applied for another programme _____
PLEASE STATE PROGRAMME

Other (please state) _____

Have not attended classes since _____
YYYY/MM/DD

Student Signature: _____

Date: _____

FOR OFFICIAL USE ONLY	
APPROVED BY: _____ SAR (ADMISSIONS)	APPROVED BY: _____ SAR (GRADUATE STUDIES)
DATE: _____	DATE: _____