



REQUEST FOR RESUMPTION OF STUDIES FORM

Semester: _____ Year: _____ Student ID number:

PERSONAL DETAILS

| | | | |
|----------------------|-------------|--------------|----------------------|
| Last Name: | First Name: | Middle Name: | Date of Birth: |
| <input type="text"/> | | | <input type="text"/> |

Postal Address:

| | | |
|----------------------|------------|----------------------|
| <input type="text"/> | Telephone: | <input type="text"/> |
| <input type="text"/> | Fax: | <input type="text"/> |
| <input type="text"/> | Email: | <input type="text"/> |

Programme: _____ Major 1: _____ Major 2 : _____ Minor: _____

Are you sponsored? Yes No

If yes, the name of your sponsor (Please bring your sponsorship letter to Registration)

REQUEST DETAILS

I would like to request (please tick appropriate box below):

- Re-admission** (suspended from studies in a previous semester for academic reasons)
- Resumption** (discontinued studies for other reasons)
- New programme** (graduated from a programme and would like to enroll in a new programme)
- Deferment of study** (offered a place in a previous semester)

The semester in which I was offered a place or last studies: Semester _____ Year _____

Student signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Checklist

- Re-admission** (Letter from the department supporting student's re-admission into the programme of study)
- Resumption/New Programme** (Counselling Transcript attached)
- Deferment of Studies** (Offer letter and admission form attached)

Decision

| | | |
|-----------------|---------------------|----------------------|
| Approved | Not Approved | Reason: _____ |
|-----------------|---------------------|----------------------|

Signature: _____ Date: _____

Checked and Updated Initial: _____ Date: _____

Completed Request for Resumption of Studies Forms should be sent to:

The Registrar
The University of Fiji
Private Mail Bag
Lautoka