

FORM:OREG003

Registered with the Fiji Higher Education Commission as a University under the Higher Education Act 2008.

Registration Certificate Number (RGN0020/11)

REQUEST FOR RESUMPTION OF STUDIES FORM

Semest	er:	Year:	Student ID number:		
PERSO	NAL DETAILS				
Last Nan	ne:	First Name:	Middle Name:	Date of Birth:	
Postal A	ddress:		Teleghana		
			Telephone:		
			Email:		
Program	me:	Major 1:	 : Major 2 :	Minor:	
Are you	sponsored?	Yes No			
			(Please bring you	r cooncarchin latter to Degistration	
If yes, the name of your sponsor (Please bring your sponsorship letter to Registration)					
	ST DETAILS	e tick appropriate box below):			
The sem	Resumption New programme Deferment of stud ester in which I was		gramme and would like to enroll in a ne evious semester)		
Student	signature:		Date:		
	FFICIAL USE ONI	.Y			
Checklis	_				
	1. Re-admission (Letter from the department supporting student's re-admission into the programme of study)				
2.	-				
3.		lies (Offer letter and admission for	rm attached)		
Decisio	Approved	Not Approved Re	eason:		
	Approveu	Not Approved Re	Ed3011.		
HOD/DEAN: Signature: Date:					
Student Academic Services: Signature: Date:					
Records updated: (YES/NO)					
Letter emailed or hand delivered: (YES/NO)					