



The University of Fiji

(An Entity of Arya Pratinidhi Sabha of Fiji)

OFFICE OF THE REGISTRAR



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REQUEST TO WITHDRAW/ADD COURSE

Student ID number:

PERSONAL DETAILS

Last Name: First Name: Middle Name: Date of Birth:

(As it appears in your Birth Certificate)

Mobile:

Email:

Are you sponsored? ☐ Yes ☐ No

REQUEST DETAILS

I wish to withdraw from the following course(s):

Reasons for withdrawal (mandatory):

I wish to add the following course(s):

Reasons for adding (mandatory):

I accept that I am liable for any outstanding fee associated with my withdrawal from the course(s) listed above and take full responsibility for the payment in full for all outstanding fees.

If you are sponsored, please ensure you obtain and submit a written approval letter from your sponsor prior to submitting this add/withdrawal form.

The final date of withdrawal is the first Friday after the mid-term break.

Incomplete applications will not be accepted by Student Academic Services for processing this Add/Withdrawal Form. Please ensure all required fields are completed in this form and all necessary documents and approvals are attached before submitting.

Student Signature:

Date:

Course(s) Withdrawal	Course(s) Added

FOR OFFICIAL USE:

Course Coordinator (Full Name & Signature): Date:

Student Academic Service (Full Name & Signature): Date:

Finance Office (Full Name & Signature): Date: