

DART ONE TO BE COMBLETED BY STUDENT



## Confirmation of Study Mode with or without attendance in each semester

PART ONE TO BE CONFESTED BY STODERY			
FULL NAME OF STUDENT MATTHEW CHAMBERS			
HOME ADDRESS WHION HOUSE, BRAITHWAIT	E, DN7 585		
UNIVERSITY/COLLEGE SHEFFIZED HAVEAN UNIVERSITYCOL	JRSE 13779 SOFTWAR	Z ENGINZENIN	6
ACADEMIC YEAR (EG 2017/2018) _2017/2018			
PART TWO - TO BE COMPLETED BY INSTITUTION			
MODE OF STUDY Please complete ALL relevant sections bel	ow		
	1st Semester	2 <sup>nd</sup> Semester	
IS THE ABOVE NAMED STUDENT REGISTERED AS A FULL-TIME STUDENT STUDYING A FULL-TIME COURSE ON A PART-TIME BASIS?	YES/NO	YE\$/NO	
OR			
IS THE ABOVE NAMED STUDENT REGISTERED AS A PART-TIME STUDENT?	YES/NO\	YES(NO	
YEAR OF STUDY TO BE FOLLOWED (1st, 2ND etc.)	3ra	319	
COURSE TITLE	BENG SOFTE	ARE ENGENE	ERRIN
NUMBER OF MODULES (1, 2, 3, etc.)	2	2	
IS ATTENDANCE REQUIRED?	YESYNO	YESYNO	
Date when student will finish course $24/5/2019$ The cost for tuition fees for this academic year £ 4, SC			
The cost for tuition fees for this academic year ££			
Signed Contact Name Department CO	CHOLAS.	SMITH	
Please note that this form must <b>ONLY</b> be signed by a member of staff			
Registry/Student Records/ Admin. Section.			
Please return completed form to:	CHEFFIELD	LLAM UNIVERSIA	Δ
Student Finance NI, Grahambridge Road, Dundonald, BT16 2HS	/		1
Telephone: 02890566200	\	EC 2018	
	FACULTY	OF SCIENCE,	/