



TRANSFER / WITHDRAWAL FORM

INSTRUCTIONS:

1. This form is to be completed to obtain approval for transfer or withdrawal application.
2. Students must pay the transfer/withdrawal fees along with the application.
3. Students are required to true and accurate information without suppression.
4. Students below the age of 18 **MUST** provide the letter of consent from parents/guardian.
5. All information in this form will be kept confidential and for internal use **ONLY**.

SECTION A: PROGRAMME INFORMATION

Course Title:

SECTION B: STUDENT'S PARTICULARS

| | | | |
|---|--|--------------|--|
| Name as in Passport: (underline surname) | | Gender: | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Date of Birth: | | Student ID: | |
| Fin No: | | Nationality: | |
| Mobile No: | | Tel No: | |
| Email: | | | |

SECTION C: REQUEST FOR TRANSFER OR WITHDRAWAL

| | |
|---|--|
| <input type="checkbox"/> Withdrawal a) Personal / Family issue b) Financial Constrains c) Work Commitment d) Others(Please specify): _____ | <input type="checkbox"/> Transfer a) Transferring to: _____ b) Reason: _____ Note: Unitedworld allows transfer from one course to another within Unitedworld only. Transfer to another school is deemed as withdrawal from Unitedworld. |
|---|--|

Dear Sir/Mdm :

I, _____ Passport No: _____, would like to inform the School that I like to (withdraw from my course / transfer to another course)* at Unitedworld.

I have been fully informed of the school's refund policy and I have gravely considered this factor in my decision.

For transfer cases, I understand that transfer is subject to my application meeting the admission requirements and the approval of my student pass (if required). I understand that there is risk involved and I will not hold any prejudice against the School nor hold any staff liable in the event my request was not successful.

Student's Signature

Date



Confirmation / Declaration by Student

I, _____ Passport No: _____, hereby confirm that I would like to

- ☐ **WITHDRAW** my studies from Unitedworld International Academy. I have been fully informed and acknowledge the school's refund policies.
- ☐ **TRANSFER** from my existing course (as stated in section A) to my preferred course (as stated in section B)

I hereby surrender my student pass, Fin no: _____ to the school for the cancellation.
(for international students ONLY)

Signature
For students below 18 years of Age

Date

Signature of parent/ guardian

Date

FOR OFFICIAL USE

ACTIONS TAKEN By:

ACTIONS TAKEN By:

Received by :

Name :

Designation :

Date :

Approved by:

Name :

Designation :

Date :