



## NOTIFICATION OF CHANGE OF COURSE OR WITHDRAWAL FROM PROGRAMME

### OFFICE USE ONLY

Please Tick

- School of Iwi Development
- School of Undergraduate Studies
- School of Indigenous Graduate Studies

### Personal and Programme Details • STUDENT MUST COMPLETE ALL PARTS OF THIS SECTION

SECTION A

TWWoA Student ID

Student Name

Contact Address

Contact Phone Number

Name of Programme

Name of Lecturer(s)

1. I would like to withdraw from the entire programme:  YES  NO as of Date:  /  /

2. I would like to withdraw from and/or enrol into the following course(s):

WITHDRAW FROM:		ENROL IN:	
Paper Code:	Course Title:	Paper Code:	Course Title:

3. My reason(s) for withdrawing from the programme/course(s) are:

• Can't afford it <input type="checkbox"/>	• Found a job <input type="checkbox"/>	• Family commitments <input type="checkbox"/>
• Moving elsewhere <input type="checkbox"/>	• Health Reasons <input type="checkbox"/>	• Can't meet course requirements <input type="checkbox"/>
• Didn't like the course <input type="checkbox"/>	• Didn't like the tutor <input type="checkbox"/>	

Other (please give reasons):

4. What do you intend to do once you have withdrawn from the programme/course(s): (Use separate sheet if needed)

- Look for work
- Look after my health
- Look after whanau
- Travel
- I have a job organised (job title):
- Study at another institution: name of programme/course:
- name of institution:

Student Signature:  Date  /  /

## Decision – Lecturers to Complete

Has **discussion** taken place between yourself and the student?  YES  NO

**Date** of discussion: / /

Confirmed Date of Official Withdrawal / /

Course Start Date: / /

Last date of attendance / /

Record and Outcome of Discussion:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Recommendation:**

\_\_\_\_\_

**Lecturers Signature:**

\_\_\_\_\_

Date

/ /

## Decision – Head of School

I approve the course change(s)/withdrawal  YES  NO

**Recommendation:**

Withdraw from programme

Claim full EFTS/fees (Withdrawal after 10% point of programme)

Do not claim full EFTS/fees (Withdrawal before 10% point of programme)

Withdraw specific courses

Claim full EFTS/fees

Do not claim full EFTS/fees

List courses

\_\_\_\_\_

**Head of School Signature:**

\_\_\_\_\_

Date

/ /

## Decision – Academic Registrar

**Academic Registrar Sign-off:**

\_\_\_\_\_

Date

/ /

## OFFICE USE ONLY

Date Rec'd by Admin:

/ /

Received by:

\_\_\_\_\_

**Actions:**

Full credit and refund, No EFTS

Full time to part time, advise StudyLink

No credit or refund, claim 100% EFTS

Letter to student with credit and refund copy

Change status to EW – CA or EW No sub

Copy of letter to student file with credit/refund copy (for records)

Completed and to file:

/ /

Completed by:

\_\_\_\_\_