

**CENTRE FOR POSTGRADUATE STUDIES**

**DROP/WITHDRAWAL FROM COURSE(S) FORM**

Kulliyah:		Programme
Session:	Semester:	Latest CGPA:

**SECTION A: DETAILS OF STUDENT**

Name:		Matric No.:
Email :	Contact No:	Total Credit hours Completed:

\*Please attached a copy of bank's slip for our reference

DETAILS OF COURSE(S)				Signature of Lecturer with Official Stamp
Course Code:	Course Title:	Type of Course:	Crdt hrs:	
<b>Reminder:</b> Form should be submitted to the Kulliyah/Institute within the adjustment/withdrawal period. Candidate is not allowed to make any adjustment on the courses after this period ended.			Total Credit Hours Withdrawn/Dropped	
			Total Workload after Withdrawal/Drop	

I understand that I am required to pay all the prescribed fees before submitting this form.

Date:	Student's Signature:
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**SECTION B: RECOMMENDATION FROM ACADEMIC ADVISOR/SUPERVISOR**

The candidate has met all the requirement stipulated in the PG Policies and Regulations. Therefore, the department decided to **\*RECOMMEND/NOT RECOMMEND** his/her application.

Date:	Signature & Stamp:
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**SECTION C: KULLIYAH/INSTITUTE APPROVAL (DEPUTY DEAN/DEPUTY DIRECTOR (POSTGRADUATE & RESEARCH**

Based on the academic advisor/supervisor and the lecturer recommendation, Kulliyah/Institute **\*APPROVE/NOT APPROVE** his/her application.

Date:	Signature & Stamp:
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**CENTRE FOR POSTGRADUATE OFFICE USE ONLY**

<input type="checkbox"/> ADJUSMENT PERIOD <input type="checkbox"/> WITH A FEE OF RM300 <input type="checkbox"/> WITH A FEE OF RM500 <input type="checkbox"/> OTHERS			
Date:	Remarks:		