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# Notification of Withdrawal/ Transfer of Institution Undergraduate and Postgraduate Taught students

First Name(s)

For guidance on completing this form, and sources of further information: Students: www.sheffield.ac.uk/ssid/change-of-status/withdraw Staff: www.sheffield.ac.uk/sss/sas/rsr/cos/withdrawal This form should also be used by staff to deem students withdrawn.

Are you studying in the UK with a visa?

You should visit/contact your department for advice before completing this form

Registration Number Please enter all 9 digits

Family Name

**Student Details** 

Please print

Non-UK/EU/EEA students may be required to leave the UK within 60 days of their withdrawal. Contact international.students@sheffield.ac.uk for advice.

Yes

Date

No

### Notification of withdrawal/transfer of Institution

 Date the student stopped attending or engaging with their programme of study
 Enter dates as DD/MM/YY
 /

 If the student is withdrawing/transferring/being deemed withdrawn following a period of leave of absence, please tick here
 CORONAVIRUS: Please confirm if this withdrawal is because you are unable to continue your studies due to the Coronavirus (COVID-19) outbreak, for instance due to illness, quarantine or an inability to study remotely:

 Yes this withdrawal is related to the Coronavirus (COVID-19) outbreak
 No this withdrawal is not related to the Coronavirus (COVID-19) outbreak

 Reasons for the withdrawal or transfer. At least one reason code must be entered, but a second reason code may also be added:
 Primary reason

 CODES:
 1 Academic 2 Financial 3 Medical 4 Personal 5 Transfer

If the student is transferring to another institution please supply the name of that institution here:

Is the student being deemed withdrawn? If so, briefly supply further information, or attach evidence of attempts to contact the student, as appropriate. We are unable to process the form without this information.

## Student Signature (unless being deemed withdrawn)

#### Signature

**Important: Check your email!** You will receive confirmation of the withdrawal to your University email account after it is processed on our system. Your University computer account will close down 2 weeks after the withdrawal is processed. You may wish to print the confirmation email for your own records, as it cannot be recovered at a later date.

## Academic Department Signatures Department staff to complete

This application has been checked for accuracy, and approved in line with any relevant General and Programme Regulations										
ACADEMIC ADVISER	Date			ACADEMIC ADVISER	Date	/	/			
DEPARTMENTAL APPROVAL	Date			DEPARTMENTAL APPROVAL	Date	/	/			
HOME DEPARTMENT NAME			7	DUAL DEPARTMENT NAME (IF APPLICABLE)						

Notes: (attach additional sheets or write notes below if necessary)

Notes: (attach additional sheets or documents if necessary)

#### ACADEMIC DEPARTMENT:

Please email the completed form to sas.cos@sheffield.ac.uk. PLEASE NOTE: you must insert a subject for the email in the following format to avoid delays in processing: XXXCOS (where XXX is your department code, eg. MAS, ACS, ACE, DEN).

Student Support Services Staff to complete										
ISS Team						Date	/	/		
Faculty Appr	oval					Date	/			
Record upda	ated		Date	/	/	Record checked				
Notified:	Dept	Student	Sponsor		NHS	Events Team		PGT checklist completed		