



APPLICATION TO WITHDRAW FROM THE CENTRE FOR FOUNDATION STUDIES

1. PERSONAL PARTICULARS

NAME: _____

MATRIC NO: _____ PROGRAMME: _____ MAHALLAH ROOM NO: _____

TELEPHONE NO: _____

REASON FOR WITHDRAWAL: (Attached relevant document)

SIGNATURE: _____ DATE: _____

2. PARENT/GUARDIAN'S CONSENT

I hereby give my consent to the application of the above named and would bear all consequences.

NAME OF PARENT/GUARDIAN: _____

SIGNATURE: _____ DATE: _____

3. APPROVAL FROM RESPECTIVE DEPARTMENT

Please secure approvals from the following departments and proceed to Office of the Deputy Dean Academic and Industrial Linkages for submission of this form.

FINANCE DEPARTMENT

The students has settled all debts with the university

(signature and official



DIRECTOR, ACADEMIC MANAGEMENT AND ADMISSION DIVISION (AMAD)

APPROVED BY:

FOR OFFICE USED:

(signature and official stamp)

Date: