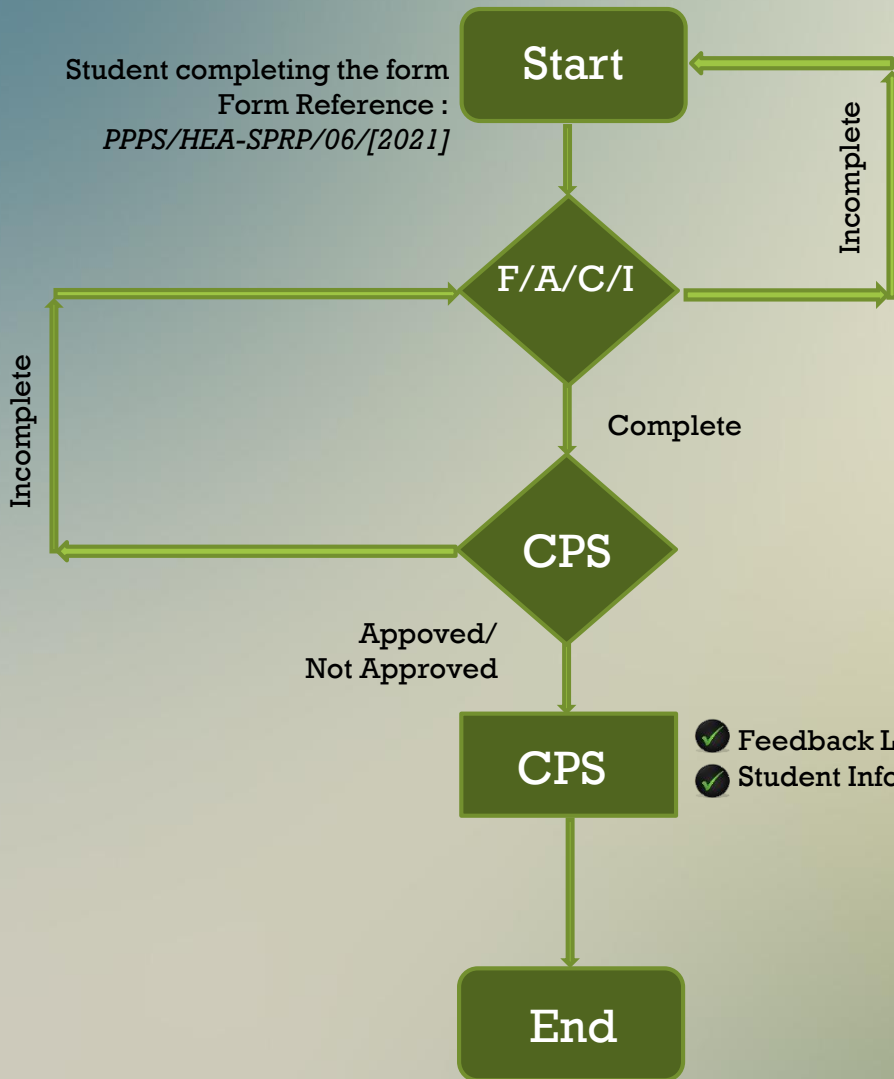


APPLICATION FOR WITHDRAWAL FROM STUDY



F/A/C/I :

- ✔ Supervisor's or Postgraduate Co-Ordinator Remarks
- ✔ Dean's Declaration
- ✔ Declaration from Department :
 - Department of Student's Affairs (email; pejhep@ums.edu.my)
 - UMS Bursar (Postgraduate's Financial Section) (email;kewpasca@ums.edu.my)
 - UMS Security Department (email; bahkes@ums.edu.my)
 - UMS Library (email; membership@ums.edu.my)
- ✔ Forward the application form to CPS

- ✔ Feedback Letter to students (Approved/ Not Approved)
- ✔ Student Information System Updated



**PUSAT PENGAJIAN PASCASISWAZAH
CENTRE FOR POSTGRADUATE STUDIES**

**BORANG PERMOHONAN MENARIK DIRI DARI PENGAJIAN
APPLICATION FORM FOR WITHDRAWAL FROM STUDIES**

Panduan kepada Pemohon / Guides to Application :

[Sila baca dengan teliti sebelum melengkapkan borang ini / Please read carefully before completing the form]

1. Pemohon perlu memastikan tidak mempunyai sebarang hutang dengan Universiti Malaysia Sabah sebelum mengemukakan permohonan menarik diri dari pengajian.
Applicant must ensure he/she does not have any debt with Universiti Malaysia Sabah when applying for withdrawal from studies.
2. Pemohon yang mempunyai tajaan perlu menyemak dokumen perjanjian tajaan terlebih dahulu sebelum mengemukakan permohonan ini.
Applicant with sponsorship is advice to refer to the sponsorship agreement before proceeding with the application.
3. Adalah menjadi tanggungjawab pelajar untuk melengkapkan Bahagian B dalam borang ini. Borang yang tidak lengkap tidak akan diproses.
It is the applicant responsibilities to complete Section B of this form. Incomplete form will not be process.
4. Sila rujuk Kaedah Pengajian Pascasiswazah UMS.
Please refer to the UMS Postgraduate Studies Rules.

(A). MAKLUMAT PELAJAR – STUDENT'S INFORMATION

Nama Penuh / Full Name : [Mengikut IC atau passport / As in IC or Passport]	
No. Matrik / Matric No. :	
No. Telefon / Emel: Phone No./ Email:	
Fakulti/Akademi/Pusat/Institut / Faculty/Academy/Centre/Institute :	
Program Pengajian/Programme	<input type="checkbox"/> Doktor Falsafah / PhD <input type="checkbox"/> Sarjana / Master
Kaedah Pengajian/Method of Study	<input type="checkbox"/> Penyelidikan / Research <input type="checkbox"/> Kerja Kursus / Coursework <input type="checkbox"/> Mod Campuran/Mix Mode
Jenis Pendaftaran/Type of Registration	<input type="checkbox"/> Sepenuh Masa / Fulltime <input type="checkbox"/> Separuh Masa / Part Time

Sebab Permohonan / Reasons for application

Tandatangan pelajar/Student's Signature: _____

Tarikh/Date : _____

**(B). PENGESAHAN DARIPADA JABATAN/FAKULTI/AKADEMI/PUSAT/INSTITUT
– DECLARATION FROM DEPARTMENT/FACULTY/ACADEMY/CENTRE/INSTITUTE**

JABATAN/FAKULTI/AKADEMI/PUSAT/ INSTITUT DEPARTMENT/ACADEMY/FACULTY/ CENTRE/INSTITUTE	PENGESAHAN PEGAWAI [Nama, Tandatangan dan Cop Rasmi] OFFICER DECLARATION [Name, Signature and Official Stamp]	CATATAN [Sekiranya ada] REMARKS [If any]
Perpustakaan UMS [Semua buku telah dipulangkan] UMS Library [All books have been returned]		
Jabatan Hal Ehwal Pelajar [Kunci Bilik Penginapan telah dipulangkan] Student Affairs Department [Hostel key has been returned]		
Bahagian Keselamatan UMS [Denda / Saman] UMS Security Office [Fine / Summons]		
Seksyen Kewangan Pelajar Pascasiswazah [Tiada sebarang tunggakan yuran] Postgraduate's Financial Section [No outstanding fees]		
Pusat Pengajian Pascasiswazah [Kad Pelajar dan Kad Rawatan telah dikembalikan] Centre For Postgraduate Studies [Student Card and Medical Card have been returned]		

(C). ULASAN PENYELIA / PENYELARAS PASCASISWAZAH – SUPERVISOR / POSTGRADUATE CO-ORDINATOR REMARKS

Ulasan / *Remarks* :
[Sekiranya ada / *If any*]

Tandatangan Penyelia/Penyelaras Pascasiswazah
Signature of Supervisor/Postgraduate Co-ordinator

Nama & Cop Rasmi/*Name & Stamp*:

Tarikh/*Date* :

(D). PERAKUAN FAKULTI/AKADEMI/PUSAT/INSTITUT / – DECLARATION FROM FACULTY/ACADEMY/CENTRE/INSTITUTE

Sokong/*Agree*

Tidak Sokong/*Disagree*

Ulasan / *Remarks* :
[Sekiranya ada / *If any*]

Tandatangan Dekan/Pengarah
Signature of Dean/Director

Nama & Cop Rasmi/*Name & Stamp*:

Tarikh/*Date* :

(E). UNTUK KEGUNAAN PEJABAT PUSAT PENGAJIAN PASCASISWAZAH / CENTRE FOR POSTGRADUATE STUDIES OFFICE USE :

[Dilengkapkan oleh Seksyen Kemasukan & Rekod Pelajar / *Completed by Admission & Student Record Section*]

Status Pendaftaran Semasa Pelajar/
Status of student's current semester : _____

Disemak oleh/*Checked by*:

Nama/*Name* :

Tarikh/*Date* :

**Kelulusan Dekan/Ketua Sektor Akademik
*Dean's/Head of Academic Sector Approval***

Diluluskan
Approved

Tidak Diluluskan
Not Approved

Ulasan / *Remarks* :
[Sekiranya ada / *If any*]

Tandatangan Dekan/Ketua Sektor
Signature of Dean/Head of Academic Sector

Nama & Cop Rasmi/*Name & Stamp*:

Tarikh/*Date* :