



Withdrawal From a Course Request Form

This form is intended for **ICT students only** and needs to be completed and submitted by email to ict@um.edu.mt and to the Departmental Administrator of your course.

Name & Surname:	
ID No:	
Course & Year:	
Date Last Attended: <i>(If applicable)</i>	
Did you Submit any Assessments: <i>(If yes, list study-unit code/s and title/s)</i>	
Were you granted any scholarship? <i>(If yes, tick applicable box and enter name of Scholarship. This applies to PG students only.)</i>	☐ Yes ☐ No Scholarship Name: _____
Reason for withdrawal:	
Have you sought professional advice before taking this decision?	☐ Yes ☐ No If yes, from whom? _____

Signature of Student

Date