

**SEMESTER WITHDRAWAL FORM**

(Continuing Student)

Registration No: \_\_\_\_\_

Semester &amp; Year: \_\_\_\_\_

Name: \_\_\_\_\_

Reason for withdrawing: \_\_\_\_\_

**I avail the visa sponsorship from SZABIST Dubai: Yeas/ No****IMPORTANT NOTE:**

- 50% of the tuition fees are refundable if you apply for withdrawal before the 4<sup>th</sup> week.
- 25% of the tuition fees are refundable if you apply for withdrawal between the 4<sup>th</sup> and 8<sup>th</sup> week.
- No amount will be refunded after 8<sup>th</sup> week.
- No semester withdrawal is allowed after 12<sup>th</sup> week
- 5% VAT applicable as per U.A.E Federal Tax Authority regulations

\_\_\_\_\_  
Student's Signature & Date

-----Do not write beyond this section-----

(For Office use only)			
Program Manager	Academic Controller	Finance Officer	Records Controller
Course Withdrawal Approved: Yes/No Remarks: _____ _____  Signature and Date	Remarks: _____ _____  Signature and Date	Remarks: _____ _____  Signature and Date	Remarks: _____ _____  Signature and Date