

## CAMPUS TRANSFER FORM

(For Inter-campus transfers only)

I wish to transfer to SZABIST Campus (Islamabad, Larkana; Karachi): \_\_\_\_\_

Name: \_\_\_\_\_ Program: \_\_\_\_\_ Registration No: \_\_\_\_\_

Number of courses completed: \_\_\_\_\_ Credits: \_\_\_\_\_

Last semester GPA: \_\_\_\_\_ CGPA: \_\_\_\_\_

Transfer to which Program? \_\_\_\_\_

I have completed at least 25% credits at the parent campus and I understand that it is not binding upon the Institute to accept me as transfer student.

Please submit this form to the Admissions Office during office hours.

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

### FOR OFFICIAL USE ONLY

Has the student fulfilled the admission criteria of the campus where he / she is transferring?

Yes  No

Has the student fulfilled the transfer credit criteria?

Yes  No

\_\_\_\_\_  
Admission Officer  
Signature & Date

RECOMMENDATION

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Program Manager  
Signature & Date

### CLEARANCE

Lab: \_\_\_\_\_ Library: \_\_\_\_\_ Finance: \_\_\_\_\_

\_\_\_\_\_  
Signature & Date

\_\_\_\_\_  
Signature & Date

\_\_\_\_\_  
Signature & Date

Provisional Transcript issued:

ZABDesk Account Blocked:

Remarks: \_\_\_\_\_

\_\_\_\_\_  
Controller Records  
Signature & Date

RECOMMENDATION

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Head of Campus  
Signature & Date

**PLEASE SEND STUDENT FOLDER WITH THIS FORM TO TRANSFERRING CAMPUS**

**Transfer Rules for Students:**

- Transfer is possible to other campuses subject to the following:
- Meeting admission criteria at the transferring campus
  - Availability of space at the transferring campus
  - Clearance of all past dues
  - Payment of Campus Transfer processing fee AED 100/-



# CAMPUS SECURITY DEPOSIT REFUND / TRANSFER FORM

Dubai Campus

(For Regular SZABIST Students)

Name: \_\_\_\_\_ Registration No: \_\_\_\_\_ Program: \_\_\_\_\_

Contact No: \_\_\_\_\_ E- Mail ID: \_\_\_\_\_

Kindly refund my Security Deposit after adjustments of my dues.

Leaving SZABIST w/o completing degree

Transfer to \_\_\_\_\_ program within same campus.

Reason for Leaving: \_\_\_\_\_

Kindly transfer my security to new program.

Please issue cheque in favor\* of \_\_\_\_\_.

\*Cheque will be issued in the name of student only.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Student

*For office use only (Do not write below this line)*

### Admissions

Remarks: \_\_\_\_\_

\_\_\_\_\_ Admission Office (Sign)

### PRO

Remarks: \_\_\_\_\_

\_\_\_\_\_ PRO (Name & Sign)

### Library

Remarks: \_\_\_\_\_

\_\_\_\_\_ Librarian (Name & Sign)

### Finance Office

Security Deposits (Visa, Campus, Hostel)			Outstanding Fees		
Other Payables			Transportation Fees		
<b>Total Payables</b>			<b>Total Receivables</b>		

Balance AED: \_\_\_\_\_ paid vide cheque number \_\_\_\_\_ dated \_\_\_\_\_.

\_\_\_\_\_ Finance (Sign & Date)

Remarks: \_\_\_\_\_

\_\_\_\_\_ Program Manager

\_\_\_\_\_ Student Advisor

### Records Office

Remarks: \_\_\_\_\_

\_\_\_\_\_ Controller Records (Sign & Date)

Remarks: \_\_\_\_\_

\_\_\_\_\_ Manager Operations (Sign & Date)

Note:

- Campus security deposits will be refunded after 30 days
- A refund of more than AED 250 will be released in the form of cheque.
- Student ID Card has to be submitted for Library Clearance. Failure of submission will lead to fine of AED 50/-.

Revised December 05, 2016



## Student Exit Interview Form

### Student Information

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

Reg. No. \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone no: \_\_\_\_\_

Email: \_\_\_\_\_

Program: \_\_\_\_\_

Date of Admission: \_\_\_\_\_

Date of Graduation/Transfer: \_\_\_\_\_

### Exit Interview Questionnaire

1. Why are you leaving SZABIST?

- A) Graduating
- B) Transferring to another University / Campus
- C) Other

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(If your choice is B or C please skip Qs 2. If your choice is A please skip Qs 3)

2. What are your future plans?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What circumstances would have prevented your departure?

\_\_\_\_\_

\_\_\_\_\_

4. What were some positive experiences that you had at SZABIST Dubai?

---

---

---

5. What were some short falls that you faced during your stay at SZABIST Dubai?

---

---

---

6. Was your experience at SZABIST according to your expectation?

YES \_\_\_\_\_ NO \_\_\_\_\_

Comments: \_\_\_\_\_

7. Were resources at SZABIST adequate to your needs?

YES \_\_\_\_\_ NO \_\_\_\_\_

Comments: \_\_\_\_\_

8. Were you given the necessary academic support at SZABIST Dubai?

YES \_\_\_\_\_ NO \_\_\_\_\_

Comments: \_\_\_\_\_

9. Did you receive adequate academic and career counseling at SZABIST Dubai?

YES \_\_\_\_\_ NO \_\_\_\_\_

Comments: \_\_\_\_\_

10. Do you think that you had sufficient exposure to co-curricular activities at SZABIST?

YES \_\_\_\_\_ NO \_\_\_\_\_

Comments: \_\_\_\_\_

11. Would you recommend SZABIST to other friends & relatives?

YES \_\_\_\_\_ NO \_\_\_\_\_

Comments: \_\_\_\_\_

12. Any other comments and suggestions:

---

---

---

For Official Use

Interview Conducted by:

Program Manager: \_\_\_\_\_ Student Advisor: \_\_\_\_\_

Signature of Students: \_\_\_\_\_

Date: \_\_\_\_\_