

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 105/-Including 5% VAT (5% VAT applicable as per U.A.E Federal Tax Authority regulations)



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

Total Payables

Total Receivables

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:

Signature of Students: _____

Date: _____

For Official Use

Interview Conducted by: _____

Signature of Interviewer: _____

Date: _____