## MIDDLESEX UNIVERSITY DUBAI TEMPORARY WITHDRAWAL



MISIS No.:									
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SECTION A (STUDENT DETAILS)							
Full Name :							
Programme of Study :							
Year of Study :	Year 1 Year 2	Year 3					
Mode of Study :	Part-time Full-time						
Personal E-mail ID :							
International/Local Contact No. :							
Last Date of Attendance :	•	ed Return Date : 01					
REASON FOR INTERRUPTION : (PLEASE TICK)							
Content of Programme	Language Difficulties	Academic Difficulties					
Travel Issues	Financial Difficulties	Family/Personal Obligations					
Social Life not what I expected	☐ Homesick	Insufficient Support from Employer					
Teaching Experience not what I expected	Transfer to another institution	Change of Employment Status/Found Employment					
University Life/Learning experience not what I expected  Other, Please specify:							
Do you have any resit/deferred assessment outstanding? (Please tick)  If Yes, Do you intend to complete this assessment during your Interruption period?  Yes  No							
You will be expected to attend at the next available opportunity.  If No, then any outstanding assessment will automatically be deferred until you return.							
Prior to completing this form, have you discussed your decision to interrupt your studies  Yes  No with your Campus Programme Coordinator? (Please tick)							
Are you aware of any Financial Implication of your decision? (Please tick)							
ignature : Date:							
SECTION B (AUTHORISATION BY VISA OFFICE)							
Is the student under university sponsorship Yes No Signature and Date:							
SECTION C (AUTHORISATION BY CAMPUS PROGRAMME COORDINATOR)							
Signature :	Approved Reject	ted Date:					
SECTION D (FOR STUDENT OFFICE USE)							
Staff Signature:	Date:						

\*For further information please refer to Student Campus Guide on <a href="http://www.mdx.ac/student-portal/campus-quide/">http://www.mdx.ac/student-portal/campus-quide/</a>
Copies To: Student Office (Original) Finance (Yellow) Student (Pink)