**Change of Registration Form**

*This form should be returned to the Graduate School, Camden*

|  |  |  |  |
| --- | --- | --- | --- |
| **Student Name:** |  | **Department:** |  |

***Please complete section A, B, C or D and sign the document before returning to the Graduate School***

|  |  |  |  |
| --- | --- | --- | --- |
| **A. Transfer to writing-up** | | | |
| Student classified as writing-up from: |  | Signature of Supervisor: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **B. Interruption of studies** | | | |
| Interrupt studies from: |  | Will return on: |  |
| Reason for interruption:  (Please attach evidence) |  | | |
| Signature of Supervisor: |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **C. Change of status** | | | |
| **\*Please circle one option:** | \*From **full** to part-time study | \*From **part** to full-time study | |
| Reason for change in status:  (Please attach justification) |  | | |
| Date of change: |  | | |
| Name of Supervisor: |  | Signature of Supervisor: |  |
| Signature of Head of Department: |  | | |

|  |  |
| --- | --- |
| **D. Withdrawal from college** | |
| Last date of attendance: |  |
| Reason for withdrawal: |  |
| Withdrawal discussed with: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Student:** |  | Date: |  |
| **Signature of Chair of PG Apricot:** |  | Date: |  |

**Graduate School use only:**

|  |  |  |
| --- | --- | --- |
|  | Completed by: | Date |
| SITS updated: |  |  |
| Payroll notified: |  |  |