**Change of Registration Form**

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

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

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

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

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

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| --- |
| **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: |  |

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| **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:**

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