

Termination of Studies



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA
Denkeleers • Leading Minds • Dikgopolo tsa Dihalefi

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Client Service Centre

Surname _____ Initials _____ Title _____
Name _____
Student Number _____
Course _____
Postal Address _____

Postal Code _____
Contact Number _____
E-mail Address _____

BURSARIES & LOANS

Have you been granted a bursary/loan? Y N If yes, please specify _____

RESIDENCE STUDENTS

Name of residence _____ Date of departure from residence _____

REASON FOR TERMINATION OF STUDIES

Academic Accommodation Choice course of study Family responsibilities Financial reasons Health reasons Language cumbrance Social Work obligations

Comments _____

DECLARATION

*The date upon which the University **RECEIVED** notification of the termination of my studies, irrespective of it having been given by post, facsimile, or in person, serves as the date of termination of my studies.*

Signature of Student _____ Date _____