

NATIONAL COLLEGE OF ART & DESIGN**Withdrawal Form**

Withdrawal is where a student leaves their programme of study permanently and ends all activity associated with their studies before they have completed the programme for which they are registered.

Before completing and submitting this form you are strongly encouraged to seek support and advice from your Tutor and Head of School/Department in the first instance in relation to your options.

You do not normally need permission to withdraw but it is your responsibility to formally notify the College of your intention and to return your student card.

Please return this completed form **along with your student card** to Student Services & Admissions. Your confidentiality is assured. Only those people who will consider and process your request will have sight of this form.

It is important that you submit the form as soon as possible as you may remain liable for fees up to the date you formally submit this completed form to Student Services & Admissions. If you are in receipt of a grant you are obliged to let your grant authority know of your change of status.

Students complete Sections A and B. Section C is completed by the Programme Office/School Office.

A. PERSONAL and PROGRAMME DETAILS

Student Name	
Student Number	
Phone Number	
Mobile Number	
Email Address	
Permanent Postal Address	
Programme Title and Code	

The College would be interested in learning the reason(s) for your withdrawal from your programme of study at NCAD.

Use an additional page appended to this form if necessary.

Your confidentiality is assured. Only those people who will process your request will have sight of this form.

Date:

Please tick this box if you do not wish to be contacted by the College for an exit interview.

B. STUDENT DECLARATION AND SIGNATURE

Please note that notification forms cannot be accepted where a student does not sign the form here at Section B.

I confirm that I am aware of options available to me other than withdrawal.

The information given in this form is true and factually correct. I confirm that this information may be disclosed, where necessary, to academic and administrative staff of the College involved in determining and implementing my request.

Signed: _____ Date: _____

C. FOR OFFICE USE ONLY

1. RECEIVED BY THE STUDENT SERVICES AND ADMISSIONS OFFICE

Office: _____

Received by: _____ Date of submission: _____

Student card handed in: YES ___ NO ___

This withdrawal will be noted/considered at the next meeting of Academic Council.