

University of Taipei

Application for Withdrawal from Degree Examination

_____ Academic Year _____ Semester Application Date : (YYYY/MM/DD)

Name		Grade	
Student Num.		Tel.	
Application Date			
Reason	<p>Because</p> <p style="text-align: center;">propose the withdrawal from degree examination and submit the form for approval.</p>		
Advisor's Signature			
Staff in Charge		Dean of College	
Chair of Dept./Inst.			

Note : A copy of the form shall be submitted to the Registrar Division under the Office of Academic Affairs for future reference