

CURRENT STUDENT WITHDRAWAL FORM

Email completed form to: enrolment@mitt.ca

Before completing this form, it is very important to review the student withdrawal policy and tuition refund information found on our <u>Cancellation</u>, <u>Withdrawal</u>, and <u>Refund webpage</u>.

Complete this form if you are a <u>current student</u> (started classes) and would like to withdraw from a post-secondary or postgraduate certificate/diploma program, or an English Language Institute program prior to program completion.

Do not complete this form if you are an applicant who has not yet been admitted (have not received a Letter of Acceptance LOA), or an admitted student whose classes have not yet started. Instead, see our <u>Cancellation, Withdrawal, and Refund webpage</u> for instructions.

SECTION A: Student Information	
Last Name:	First Name:
Email:	Student #:
Name of the program or course you wish to withdraw from:	
Intake:	Year in program:
SECTION B: Withdrawal Information	

The effective withdrawal date will be the date the Institute receives the completed Current Student Withdrawal Form.

Please select the reason(s) for your withdrawal:

- Voluntary Withdrawal Program Not Suitable
- Voluntary Withdrawal Dislike Program
- Voluntary Withdrawal Personal Reasons
- Voluntary Withdrawal Financial Reasons
- Voluntary Withdrawal Secured Employment
- Voluntary Withdrawal Relocated
- Voluntary Withdrawal Sponsorship Timetable Changes
- Voluntary Withdrawal Unknown Reason
- □ Visa Refusal (Visa refusal letter must be submitted no later than 6 weeks after the refusal letter issued by CIC)
- Other:_

SECTION C: Acknowledgement and Signature

I have reviewed the appropriate tuition refund schedule posted on <u>Cancellation</u>, <u>Withdrawal and Refunds</u>

 \Box I understand there are non-refundable fees when I withdraw from my program or any course in it

I have read the <u>Student Withdrawal Policy</u>

I understand I may contact a student advisor for assistance regarding my withdrawal. To chat with an advisor, email: <u>studentservices@mitt.ca</u>

Student Signature: _____

Date: ___

September 2024