

## Withdrawals PG Student Cases

E-mail form to pgcases@tcd.ie Telephone Support: 01 896 4501 (Academic Registry)

PGCaseTemplate\_WithdrawalsV01

Section A: Basic Details				
Student Name:				
Student ID:				
Course Name:				
Source of Funding - if known: (If not listed, please provide details in Section C.)				
Duration of Funding:	From Date To Date			
Section B: Reason for withdrawal?				
Course not as expected:		Health I	lssues:	
Personal Issues:		Course Committee Decision:		
Financial Issues:		Other: (Please specify	below)	
Have you discussed this request with your course co-ordinator/supervisor?  (If form is completed by Student)			Yes No	

Additional reasons for withdrawal, if required:				
Have you consulted the College Calendar with regard to your request?	Yes			
	No			