Student Withdrawal Form, Academic Year __________

It is recommended that you discuss your decision to Withdraw with your Head of Department/ Lecturers/Student Resource Centre/Careers Officer/Course Tutor before you complete form.

Student Name: _________________________________________________

Student Number: ________________________ Mobile No: ________________________

Course Title & Year: ____________________________________________

I am withdrawing from the above programme on (last date attended) ____ / ____ /_____

Reason for Withdrawal (Please tick where appropriate)

<table>
<thead>
<tr>
<th>Employment (01)</th>
<th>Apprenticeship (02)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Reason (06)</td>
<td>PLC Course, Other IT/ Third Level College (03)</td>
</tr>
<tr>
<td>Medical (10)</td>
<td>Did not Like Course/Not Suited to Course (11)</td>
</tr>
</tbody>
</table>

Other Reason (09) Please State: ____________________________________________

Full Time Students

Have you paid the Student Contribution of € 3,100 Yes ☐ No ☐

On a Student Grant (SUSI/VEC) Yes ☐ No ☐

You are responsible for informing the awarding body of your withdrawal
In the event of your withdrawal, student fees will be charged as follows:

Your official withdrawal date is the date this form is returned to the Registration Department

<table>
<thead>
<tr>
<th>Official Withdrawal Dates</th>
<th>Refund</th>
<th>Fee Liability</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 31 October</td>
<td>Full Refund of Fee</td>
<td>No Fee Liability</td>
</tr>
<tr>
<td>01 November – 31 January</td>
<td>Excess of liability paid (50% Student contribution and 50% tuition)</td>
<td>50% Student Contribution Fee 50% Tuition Fee (where applicable)</td>
</tr>
<tr>
<td>&gt; 31 January</td>
<td>No Refund</td>
<td>Full Fees</td>
</tr>
</tbody>
</table>

STUDENT CARD MUST BE RETURNED WITH THIS FORM

Student signature: ________________________ Date: ________________________

Head of Department: ________________________ Date: ________________________

This form should be returned to: Registration Dept., AIT, Dublin Road, Athlone

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Version 1.0.
Information and fees etc. contained in this document are effective from September 2019.
1. AIT has data protection and privacy policies which govern and detail how we process personal data. These are available on the AIT website at www.ait.ie/gdpr. We request that you familiarise yourself with these documents.

2. We will only use the data you have provided on this form to process your request for a withdrawal.

3. Where the reason for leaving puts a duty of care on the Institute for further action, we reserve the right under Article 6 (d) processing is necessary to protect the vital interests of the data subject or of another natural person, to follow up in a manner deemed appropriate by our Student Services/Institute Management, up to and including a follow up phone call/contact with you or with services appropriate to the situation.

4. Your information will be retained on file, in the Registry office, for the academic year then it will be shredded confidentially.

5. With the exception of the follow up process noted in point 2, this information will not be shared with anyone outside of the appropriate staff of the Institute.

6. By completing and signing this form you are agreeing to the conditions of processing.