NPUST Application for Attendance Certificate for Withdrawal (Transfer)

Student ID No.		Departme	nt
Name	Chinese Name : English Name : (as on the passport)	Program	☐Four-year Undergraduate ☐Master ☐Doctor
Cellphone Number		,	
Date of Birth	(Year)	(Month)	(Day)
Date of Enrollment	(Year)	(Month)	(Day)
Applicant's Address			
Remarks	 The application may only be submitted upon completion of the withdrawal procedures. Please print out the completed information and drop this application form to the Registration Division. Bring your student ID card to the Registration Division. If you don't pick up your application after 10 days, the Division will not be responsible for its safekeeping. If you need to send the application by mail, please enclose a self-addressed envelope with sufficient postage. 		
Applicant's Signature		Date ofApplication	(Year) (Month) (Day)
Signature of Verifying			
Personnel Signature of Registrar		Signature of Dean of Academic Affairs	Approval of Authorized Representative
Receiver's Signature		Date of Receive	(Year) (Month) (Day)

^{*} In accordance with the relevant provisions of the Personal Data Protection Law, the personal data and attachments filled in this application form are only for school use. For further reference, this request form will be kept for 1 year, and the scanned electronic file 5 years.