



Al-Maktoum College
of Higher Education

INTERRUPTION OF STUDIES FORM **(SQA Programmes)**

Please complete this form in BLOCK capitals if you wish to interrupt your studies for a period of time. Students can request an Interruption of Study ranging between 3 weeks and 12 months.

When completing this form, students should refer to the *Student Attendance and Progress Policy*. The form should be returned to Student Administration or studentadmin@almcollege.org.uk

Before submitting this form, please ensure you have spoken to your Programme Coordinator or other relevant member of staff to ensure that all options have been discussed which may allow you to continue your studies.

Student's First Name	
Surname	
Date of Birth	
Student ID Number	
Programme of Study	
Address for future correspondence	
Email	

The effective Interruption of Studies date shall be the later of the two below and you will be charged tuition fees up to this date:

- (i) the date on which Student Administration receives formal notification of Interruption of Studies from the student;
- (ii) the last date of attendance before the break.

If you have a funding body, they will be notified.

If you hold a **Tier 4 visa**, the College is required to notify the UK Visas and Immigration of your Interruption of Studies. Your sponsorship will also be withdrawn.

Please indicate your reasons for Interruption of Studies:

- Ill health
- Parental responsibilities
- Financial hardship
- Exceptional Professional Commitments
- Compassionate grounds

I have discussed my wish to interrupt my studies with:

- | | | | |
|-----------------------|--------------------------|-------------------------|--------------------------|
| Unit Coordinator | <input type="checkbox"/> | Student Administration | <input type="checkbox"/> |
| Programme Coordinator | <input type="checkbox"/> | Student Welfare Officer | <input type="checkbox"/> |
| Principal | <input type="checkbox"/> | Other member of staff | <input type="checkbox"/> |

Please indicate when you intend to return to your studies:

It would be helpful if you could provide further details on your decision to interrupt your studies so that the College may improve its services. In particular, please indicate if there were any additional support measures which you feel would have been helpful and may have resulted in you continuing your studies at this time.

Student's signature: _____

Date: _____

I approve the request to interrupt study and confirm that the request complies with the College policies. The student and other relevant staff have been advised accordingly.

- *Medical evidence has been received (if applicable)*
- *UKVI has been informed (if applicable)*

Programme Coordinator's signature: _____ Date: _____

SQA Coordinator's signature: _____ Date: _____