



THE UNIVERSITY OF
**WESTERN
AUSTRALIA**

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**ALTERNATIVE EXIT FORM FOR
NON COMBINED
COURSES ONLY**

Student ID

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This Alternative Exit form must be submitted directly to your Faculty

Faculty Rule: _____

PERSONAL DETAILS		
Family Name	Given Names	
Contact Address		
Suburb	State	Postcode
Telephone	Mobile	

To the Dean/FAO/Student Adviser of the Faculty of:

I consider that I have qualified for the award of:

and wish to withdraw from my:

Under Faculty Rule _____ and I wish to graduate with a

Student's Signature: _____ Date: / /

FACULTY USE ONLY	
Approval by Dean/FAO/ Student Adviser Signature: _____	Date: _____
Faculty of _____	

STUDENT ADMINISTRATION USE ONLY		
FEES PROCESSING	ENROLMENT PROCESSING	GRADUATION PROCESSING