**Shanghai Jiao Tong University**

**Application Form for Quitting School**

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| Name |  | Student ID |  |
| Gender |  | Class ID |  |
| Schools/ Departments |  | Major |  |
| Home Address |  | Postcode |  |
| Home Phone |  | Mobile |  |
| Dormitory |  | E-mail |  |
| Application Statement:Applicant Signature: Date: |
| Advice of Health Division (Please fill the blank if you quit because of health issues):  Signature of Physician: (seal) Date: |
| Advice of Supervisor:Signature: Date:  |
| Advice of School/Department:(□Agree □Disagree)Signature of School/Department Dean: (□Agree □Disagree)Signature of School/Department leader in charge of student affairs: (School/Department Seal) Date: |
| Advice of Student Affairs Office: Signature (Seal): Date: | Advice of International Student Center:Signature (Seal): Date: |
| Advice of the Graduate School:Signature: (Seal) Date: |
| On / / (date), the University Degree Committee approved the application of the student to quit school.Signature: (Seal) |
| Code of Certificate of Incompletion |  | Code of Certificate of Leaving  |  | Leaving School on / /  |

Note:

1. The form should be in duplicate copies, one for the Graduate School for Archive, the other for the Personnel Department.
2. Address of Student Affairs Office: 204, New Administrative Building B; International Student Center: B807, New Administrative Building; Academic Affairs Office of the Graduate School: 327, Chen Rui Qiu Building.
3. Please print in double-side.