



Deregistration Form

Section 1 - Student Information

Surname:	s-Number:
Given name:	Phone:
External Registration	
<input type="checkbox"/> Immigration Office/IND (copy of Residence Permit required)	<input type="checkbox"/> DUO
<input type="checkbox"/> Other, namely	
Current Address	
Street and House Number:	
City:	Postcode: Country:

Section 2 - Reason for Deregistration

<input type="checkbox"/> Graduation with Degree/Certificate (copy of certificate/degree)
<input type="checkbox"/> Returning home country (copy of travel planning proof)
<input type="checkbox"/> Change to other Institute (proof of registration required)
<input type="checkbox"/> Cancellation by Wittenborg based on finance or other reason (to be elaborated below)
<input type="checkbox"/> Other
Please state the reason and provide support documents:

Section 3 - New Living Address if applicable

Street and House Number:	Postcode:
City:	
Country:	

By signing below I acknowledge that the information I have provided is accurate to my knowledge.

Expected Deregistration Date:

Signature:

Date:

Section 4 - Office Use Only

Date Received:	Confirmation of receipt sent to requester (initials):
Deductions from Finance / Manager (if applicable)	
<input type="checkbox"/> Copy of Residence Permit	
<input type="checkbox"/> Copy of registration of other University	
<input type="checkbox"/> Copy of Certificate/Degree of Wittenborg	
<input type="checkbox"/> Copy of Travel Planning: Travel Tickets/Boarding Pass etc.	
<input type="checkbox"/> Other (specify):	
Notes:	
Front Desk/Library Dep. Signature	Date of Completion of Action:
<ul style="list-style-type: none"> • Check returning of Study Material & Stu. Card • Inform Tutor, Finance dep. • Original form handed over to Registrar 	
Financial Dep. Report to Registrar	Date of Completion:
Registrar Signature	Date of Signing :
Expected Date of Deregistration:	
End of Block:	
End of Year:	