



CHECK-OUT FORM
(For Bachelor's Degree Programmes)

Important Notes

1. Students who apply for deferment of study or withdrawal from study are required to complete the **Application Form for Deferment of Study / Withdrawal from Study (REG/Form/008)** and **Check-Out Form (REG/Form/002)** and clear all outstanding items with the departments concerned.
2. Discontinued and inactive students are required to make up the check-out procedures by completing the Check-Out Form (REG/Form/002) and clear all outstanding items with the departments concerned before applying for re-admission of study. However, they are not required to obtain approval from the Dean of the academic unit concerned for the check-out.
3. Students who cannot complete this application in person may authorize a representative to complete it on his/her behalf by completing and signing the **Authorization** on the back page of this application form. The authorized representative must submit this application form together with the **I.D. copies of both parties**.
4. If students leave the University in the course of study without going through the check-out procedures, no official document (such as testimonial, transcript or graduation certificate) will be issued.
5. All resuming and re-admitted students should pay their tuition fees according to the tuition schemes of the resuming/re-admitted year and are required to check the study plan with the general office of the academic unit concerned.

Student Information

Name: _____ Student No.: ---

Academic Unit FAH FBA FED FHS FLL FSS FST

Major/ Specialization: _____

Contact No.: _____

E-Mail: _____

❖ Notification will be sent through e-mail upon completion of check-out procedures.

❖ I declare that the information provided in this application form is correct and I have acknowledged and understood the following <Personal Data Collection Statement of the Registry of the University of Macau> stated below:

The University of Macau, in accord to the purpose of providing the related administrative services requested by applicants, requires applicants to fill in this application form and submit to the Registry. The personal data collected in the form will only be used for the mentioned purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures. The transmission of personal information over the Internet may lack protection and security. There is a risk that your information may be accessed or used by an unauthorized third party.

The application will not be proceeded if applicants fail to fill in any of the mandatory fields as required in the application form in accord to the personal-identification and education-related information.

To make correction of your personal data held by the University or to apply for related testimonials, undergraduate students can submit the request to the Registry while postgraduate students should contact the Graduate School.

Applicant's Signature: _____ **Date:** _____ / _____ / _____

For Academic Unit's Approval

| Major Programme | Remarks | Signature of Dean of Academic Unit and Stamp |
|---|---------|---|
| <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove | | Date: _____ / _____ / _____ |

| For Office Use Only | |
|--|---|
| Registry | Signature and Stamp of REG |
| Current Status: <input type="checkbox"/> D- Discontinuation of study <input type="checkbox"/> R- Deferment of study <input type="checkbox"/> N- Inactive Student <input type="checkbox"/> W- Withdrawal from study <input type="checkbox"/> Administration fee for inactive student RC Information: <input type="checkbox"/> CKLC <input type="checkbox"/> CKPC <input type="checkbox"/> CKYC <input type="checkbox"/> CYTC <input type="checkbox"/> FPJC <input type="checkbox"/> LCWC <input type="checkbox"/> MCMC <input type="checkbox"/> MLC <input type="checkbox"/> SEAC <input type="checkbox"/> SPC <input type="checkbox"/> N/A | Date: _____ / _____ / _____ |
| University Library | Signature and Stamp of LIB |
| <input type="checkbox"/> Outstanding record(s) cleared | Date: _____ / _____ / _____ |
| Residential College | Signature and Stamp of RC |
| <input type="checkbox"/> Move-out procedure completed <input type="checkbox"/> Non-RC resident | <input type="checkbox"/> CKLC <input type="checkbox"/> CKPC <input type="checkbox"/> CKYC <input type="checkbox"/> CYTC <input type="checkbox"/> FPJC <input type="checkbox"/> LCWC <input type="checkbox"/> MCMC <input type="checkbox"/> MLC <input type="checkbox"/> SEAC <input type="checkbox"/> SPC Date: _____ / _____ / _____ |
| Treasury Section | Signature and Stamp of TRE |
| <input type="checkbox"/> Outstanding record(s) cleared | Date: _____ / _____ / _____ |

AUTHORIZATION

I (Name) _____ (I.D. No _____) hereby authorize (Name) _____ (I.D. No _____) to act on my behalf to complete the check-out procedures.

I declare that the information provided in this authorization is correct and I have acknowledged and understood the <Personal Data and Collection Statement of the University of Macau/the Registry of the University of Macau>.

Signature: _____

Date: _____ / _____ / _____

Note: Please submit this authorization together with I.D. copies of both parties.

| Receipt | Signature and Stamp of TRE |
|--|---|
| The student (Name) _____ (Student No. : <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/>) has completed the check-out procedures on _____ / _____ / _____. | Date: _____ / _____ / _____ |