

## WITHDRAWAL FROM CANDIDATURE FORM

- This form once completed and fully signed is to be emailed to the Graduate School [hdrsupport@scu.edu.au](mailto:hdrsupport@scu.edu.au)

**ATTENTION MAC USERS:**

This form will be corrupted if opened in Preview.  
Please use Adobe Acrobat Reader to view and complete form.

### SECTION A: ENROLMENT DETAILS

Title:	Family Name:	Given Name:
Student ID:	Phone:	Email:
Faculty:		
Enrolled in:		
Principal Supervisor Name:		
Other Supervisors Name:		
Do you hold a scholarship?	N/A	YES      NO
If YES, what is the scholarship?		
Reason for withdrawal		
Would you like to submit a confidential statement regarding the reason for withdrawal? Please submit that direct to the <a href="mailto:manager.gradschool@scu.edu.au">manager.gradschool@scu.edu.au</a>		YES      NO
Date you wish the withdrawal to take effect from:		

### SECTION C: SIGNATURES

Applicant Name:	Signature:	Date:
Principal Supervisor	Signature:	Date:
Director Higher Degree Research Training:	Signature:	Date:

Send completed form to: [hdrsupport@scu.edu.au](mailto:hdrsupport@scu.edu.au)