If you wish to interrupt your studies, please complete sections 1-2 of this form with supporting documents if applicable and submit the form to [ASO@nottingham.edu.cn](mailto:ASO@nottingham.edu.cn). The Academic Services Office will inform you the outcome of your application.

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| **Section 1 – Your Details**  First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student ID Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Section 2 – Interruption Details** School/Department: \_\_\_\_\_\_\_\_\_\_ Course Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year of Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_For Year3 (Part I) student only, please tick your current exchange status of this academic year:Exchange Out for One Semester (Autumn/Spring) Exchange Out for One Year Study at UNNC  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **d** | **d** | **m** | **m** | **y** | **y** | **y** | **y** |   **Last date of attendance on the above course:**  \*Please note that Finance Office will refund your tuition fee based on the above last date of attendance.  **Proposed length of interruption:** One Year One Semester Others,please indicate    The University does not automatically allow a student to engage in a period of repeat study on the same course. If you are requesting a period of repeat study, you are required to provide evidence of extenuating circumstances with this interruption form so that your request can be formally considered by the University.  Interruptions should not be approved by University just before the start of examinations, as this will provide the student with an unmerited advantage.  **Reason(s) for interrupting your study:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Please provide any evidence or additional document(s) in support of this request\*)  Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **\***Examples of circumstances and required evidence:   * Medical reasons (Evidence: A medical certificate or letter issued by AA or AA+ hospital) * Internship/Placement (Evidence: Letter of confirmation from the relevant organisation) * Unavoidable Family Commitments (Evidence: A medical certificate or supporting letter) * Other (please give details and provide supporting documents)   **Please complete section 1-2 above and send your complete application supplied with supporting documents to** [**ASO@nottingham.edu.cn**](mailto:ASO@nottingham.edu.cn) **.** |
| **Section 3 – Office Use Only** (School/Department/Faculty Office)  **Proposed date of returning on the above course:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **m** | **m** | **y** | **y** | **y** | **y** |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **d** | **d** | **m** | **m** | **y** | **y** | **y** | **y** |   **New expected completion date:** |

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| Section 4 – School Consultation **To be** **completed after Sections** **1 to 3 have been completed.**  I confirm that I am aware of the request to interrupt study and have discussed the request with student in light of the procedures.  Comments(please tick√): **support** **not support**  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Head of School/Department Nominee) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Section 5 – Global Engagement Office Confirmation (for international students only) **To be completed after section 1-4 have been completed.**  On behalf of the Global Engagement Office, I can confirm that the student has been fully informed of the implications this interruption will have on his/her visa status in China. The student has been told that the University is obliged to report this interruption to the relevant Chinese authorities at some point in the near future.  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (On behalf of the Global Engagement Office) Date: \_\_\_\_\_\_\_\_\_\_\_\_ |
| Section 6 – University Approval **To be** **completed after Sections** **1 to 5 have been completed.** I approve the above request to interrupt study and have considered this request in light of the procedures outlined in the Quality Manual[[1]](#footnote-1). The student has been advised accordingly. Does the University of Nottingham Ningbo China require medical evidence to confirm that the student is fit enough to engage with academic study prior to the next period of registration? Please **✓** below:  ⬜ Yes – the Academic Services Office will request this  ⬜ No – the Academic Services Office will **not** request this  Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Vice Provost Teaching and Learning or Nominee) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. [↑](#footnote-ref-1)