NOTIFICATION OF INTENTION FORM



This form should be completed by undergraduate students who will NOT take or have failed the July assessment resits in order that we can update our records and inform External Bodies e.g. Student Finance England/Wales, UKVI (if applicable). The completed form should be returned to the Student Records Office, 1st Floor, Main Arts Building, College Road, Bangor LL57 2DG or via scanned attachment to student-admin@bangor.ac.uk

Home/EU students: please note that students are normally only eligible for one additional year of financial support from Student Finance. If you are unsure of the financial implications of repeating study please contact the Money Support Unit for advice before completing this form (moneysupport@bangor.ac.uk or Tel: 01248 383566 / 3637)

International students: please ensure that you discuss the implications for your visa with the International Student Support Office prior to completing this form (<u>internationalsupport@bangor.ac.uk</u> or tel: +44 (0) 1248 38 2882).

Please note that the options available to you are outlined in your examination results letter. Should you wish to discuss your options before coming to a decision please contact your personal tutor or course administrator in the first instance.

Section A – to be completed by student										
Name:						Date of Birth:		Student ID No: 500		
Current Degree Programme:										
Current Academic School: Year of Course (1,2,3,c									or 4):	
In the next academic year I intend to (tick appropriate option below):									✓	
1. Register as a part-time student to repeat the Year of Course (as specified above) I will be registering for the modules listed below (up to a maximum of 90 credits):										
2 ,,	Module code (e.g. ASB 1001)	Credit value		Module (e.g. ASB	code	Credit value		Module code (e.g. ASB 1001)	Credit value	
(1)			(5)				(9)			
(2)			(6)				(10)			
(3)			(7)				(11)			
(4)			(8)				(12)			
3. Full-time Repeat of Current Degree Programme as specified above [only available if offered by the Senate Examination Board - please consult your results letter]. Please select from the options below (✓): Repeat the entire academic year: Repeat Semester 1: Repeat Semester 2:										
4. Change my Degree Programme [please note that if you choose this option, the official 'Change of Degree Programme' application must also be completed, authorised by the academic school(s) concerned and returned to the Student Records Office along with this form]										
5. I am permanently withdrawing from my studies with effect from the end of the previous academic session.										
Signature (Student): Date:								ite:		
Section B – for Academic Registry use only										
Received Date (Stamp): Approved:					Student Record updated:				Notification to external bodies (if applicable):	
	Signature: Date:				Signature: Date:			Signature: Date:	_	