



Komar University of Science and Technology

زانكۆی كۆمار بۆ زانست و ته كنه لۆجيا

Office of Student Affairs  
and Registration

نوسینگه ی کاروباری فیڤخواز و  
تۆمارکردن

Ethics—Knowledge—Skills

## Form of Withdraw From KUST

**Student Name:**

**Student Code:**

**Department:**

**Phone Number:**

I request to withdraw from Komar University of Science and Technology starting from ( / / ) in making this request.

I understand that I have the right to have the grades earned during my enrollment and no right to any financial compensation from the university.

Library Signature and Stamp:	Accounting Office signature and Stamp:
OSAR Signature and Stamp:	Lab Unit Signature and Stamp
Student Signature and date:	Reason of withdrawn:

