

OVERSEAS CAMPUS TRANSFER FORM

| PLEASE WRITE IN CAPITAL LETTERS AND COMPLETE ALL RELEVANT SECTIONS | | | | | |
|--|---------------|----------------------|-----------------|--|--------|
| Name: | | | | | |
| Student No. | | | | | |
| CURRENT PROGRAMME OF STUDY | | YEAR (1/2) | MODE (FT/PT) CA | | CAMPUS |
| | | | | | |
| PROGRAMME TRANSFERRING TO | | YEAR (2/3) | MODE (FT/PT) | | CAMPUS |
| | | | | | |
| MODULES TO BE STUDIED (including choice of optional module/s) | | | | | |
| MODULE CODE | MODULE TITLE | 10/3/ | START DATE | | |
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| Intended Date of Return to Hon | ne Campus: | | | | |
| Note: If transferring permanently, write "No Return" | | | | | |
| | | | | | |
| Are you a UK/EU student in receipt of SLC funding? Yes No (tick box) | | | | | |
| TO BE COMPLETED BY STUDENTS TRANSFERRING TO LONDON ONLY | | | | | |
| Students requiring a Tier 4 Visa (Non EU/UK passport holders): Please tick to confirm you have submitted a clear colour copy of your ID/photo page of your passport | | | | | |
| Please tick the relevant box for the below statements: • I have previously studied in the UK Yes • I have previously had a visa for the UK refused Yes • No | | | | | |
| The International Student Advice team in London will assist you with your visa application. They can be contacted via email (<u>inadvice@mdx.ac.uk</u>). | | | | | |
| Students with a UK/EU passport should complete and submit the following along with this form to have their tuition fee level assessed, as otherwise you may be classed as an International student for fee purposes. Please tick to confirm this has been submitted: | | | | | |
| Residential Category Assessment Form (<u>http://unihub.mdx.ac.uk/support/forms/index.aspx</u>) | | | | | |
| STUDENT DECLARATION: I confirm my wish to transfer as above and understand that it is my responsibility to make all arrangements and pay all tuition fees and costs of transfer including Student Visa if required. | | | | | |
| MDX Email address: | M | Iobile Phone Number: | | | |
| Signature: | Da | Date: | | | |
| AUTHORISATION BY PROGRAMME LEADER/PROGRAMME COORDINATOR OR AUTHORISED MEMBER OF ACADEMIC STAFF | | | | | |
| I agree to this transfer on acade | emic grounds. | | | | |
| Name: | Si | Signature: | | | |
| Position: | Da | Date: | | | |
| | | | | | |

Submission of application and accompanying documents:

- Students applying from an MDX overseas campus: please return the completed, signed form to your • Campus Student Office.
- Students applying from the London campus: please return the completed, signed form to UniHelp. •

If you are transferring from London to an Overseas Campus, the Local Student Office will assist you with your visa application and induction arrangements.