

**Suspension of Studies Guidance**

1. Normally a student who requests suspension of studies returns one year after their date of last attendance
2. In some circumstances students are able to return at the beginning of a semester or trimester
3. In exceptional circumstances student may be able to repeat a significant part of their studies

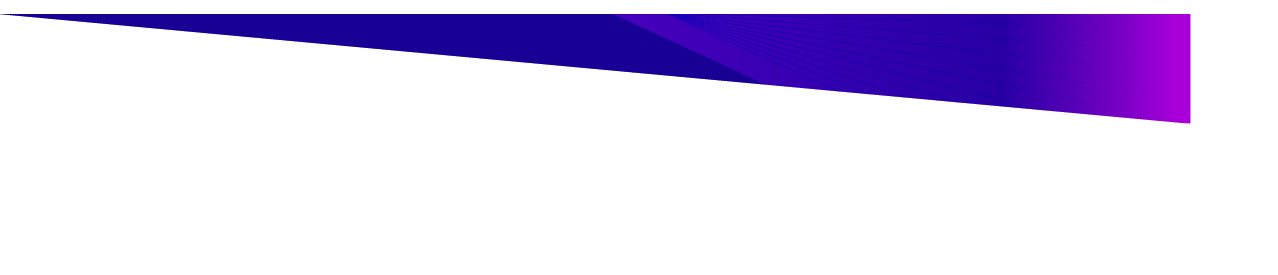
If you are in receipt of student finance you must inform them of your suspension. We will inform them of your last day of attendance; this will generate a reassessment of entitlement. If suspending on health grounds your finance may be extended by 60 days. You may also wish to discuss with them financial hardship, future funding and possible personal compelling reasons

**Suspension of Studies Instructions**

University of Hull Programmes

Complete the ‘[Collaborative Partners Suspension of studies’](#HULL) form for all suspension requests. If you apply for **number 1** above, this will be automatic on submission of the form.

If you are applying for **number 2 or 3** above, you must provide evidence to support your application. If your application is not approved, you will automatically revert to number 1 with a return date of the 1-year anniversary of your last day of attendance.



**Collaborative Partners Suspension of Studies**

**University of Hull programmes only**

This form is available to students, and should be completed by the student, or on their behalf with their knowledge and agreement.

Use this form for one of the following options:

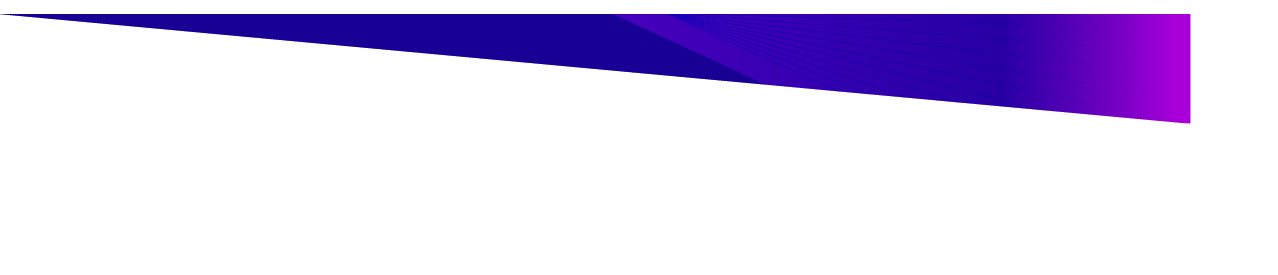
1. Request to suspend your studies for up to one year.
2. Apply for a repeat of one full trimester which will result in a period of suspension.
3. Apply for a repeat of one full academic year which will result in a period of suspension
4. Apply for an extension to an existing suspension.

**All decisions for options 2-4 will be made by the Student Progress Committee.**

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| **Personal Details** | |
| **Full name** | Enter name. |
| **Student number** | Enter your student ref. |
| **Date of birth** | Enter D.O.B. |

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| **Course Details** | |
| **Course Title** | Enter course title e.g. BA Business Mgmt. |
| **Course code** | Enter course code e.g. H1003/1C06. |
| **Year of study** | Enter year of study e.g. Year 1. |

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| **Type of Suspension** | |
|  | **Please Tick** |
| First standard suspension |  |
| Suspension of study with repeat trimester. |  |
| Extension of existing suspension. |  |
| Suspension of study with repeat year |  |



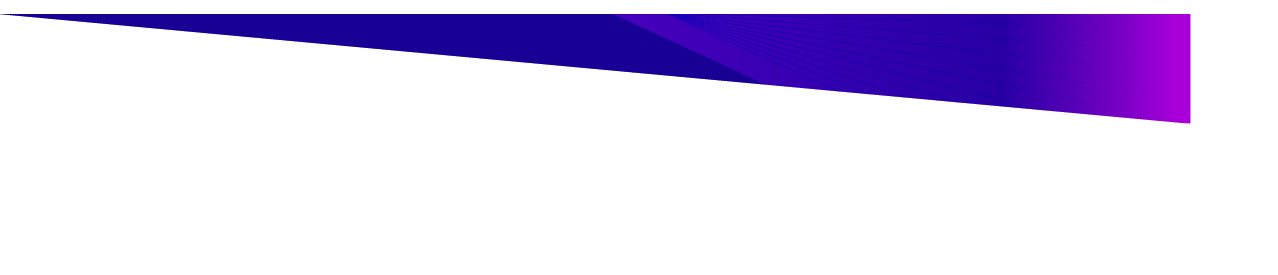


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| **Attendance Details** | |
| **Last date of attendance** | Enter date |
| **Date will return to studies** | Enter date |

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| **Reasons for request**  Give brief, clear reasons for your request for the suspension (and/or repeat period). Attach to this form as much supporting evidence as possible, particularly if the reason for the suspension relates to medical or personal problems. Continue on a separate sheet if necessary. |
| Add reason for suspension of studies. |

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| **Evidence** | |
| What evidence of your circumstances are you including to support your request: | **Please Tick** |
| Doctor/Hospital Letter  (Including GP/Medical Evidence Form – available on the University website) |  |
| Prescription/Evidence of Medication |  |
| Therapy/Counselling Letter |  |
| Other 3rd Party supporting letter (including family, employers, police etc.)  Please state: |  |

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| **Student Signature** |
| Add signature |



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| **Supporting Statement from Collaborative Partner** |
| Add supporting statement prior to submission |
| **Name:** Enter name. |

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| **University Use Only** | |
| **Secretary of SPC Comments** | Click to enter text. |
| **Decision** | Click to enter text. |
| **Date** | Click to enter text. |

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| **University Use Only** | |
| **Chair of SPC Comments** | Click to enter text. |
| **Decision** | Click to enter text. |
| **Conditions of approval** | Click to enter text. |
| **Date** | Click to enter text. |