

Request to Retain Scholarship

UTS scholarship recipients should use this form to request approval to waive a condition of the scholarship (eg. reducing study load, taking leave of absence, etc.) due to exceptional circumstances.

Student Name					
Student Number		Session & Year			
Name of Scholarship					
What is the purpose of	this request?				
☐ Full-time enrolment load across Summer, Autumn and Spring sessions					
Reduced study load to part-time					
Leave of absence (if approved, Leave of Absence will only be granted one session at a time)					
☐ Transfer to another degree					
Did not meet the required academic eligibility requirements					
Other - Notify UTS of circumstances affecting study and/or scholarship					
	mstances of your request. umentation where appropriate.				

Explain how approval of this request will assist you. How do you expect to meet the Conditions of Award of your scholarship in the future (where applicable)?					
	_				
Declaration					
I have provided a true a	nd full account of my situation.				
Signature:		Date:			
Notification of outco					
	attend a meeting with UTS Sch	olarships to support t	his application. Once		
·	ssessed, UTS Scholarships will				
	will explain how your scholarsh rulty or the Student Centre.	nip will be affected an	d any further actions to		
UTS Scholarships use on	ly				
Outcome					
	1				
Approved by (print)					
Approved by (print) Position					