

STUDENT SERVICE REQUEST FORM

After you complete this form you must take it to the Department of Finance to be signed and then return it to the Department of Academic Affairs. The University reserves the right not to process requests made by students having outstanding payments or other obligations to the University.

| IF ANY OF THE INFORMATION REQUITO THE STUDENT. | ESTED BELOW IS NOT | FULLY COMPLET | red, no s | ERVICE W | ILL BE PROVIDED | |
|--|--------------------|--|---|----------|-----------------|--|
| Student Name | | | | | | |
| Date of Birth | | | | | | |
| Student Number | | | | | | |
| Telephone Number | | | | | | |
| Programme of Study | | | | | | |
| Degree Objective (please tick where appropriate) | O BACHELOR | O MASTER | | | | |
| Semester(s) or Year(s) for which documentation Is requested | | | | | | |
| Student's Signature | | | | Date | | |
| TYPE OF REQUEST | | | | | | |
| LETTER OF REGISTRATION WITH THE UNIVERSITY OF NICOSIA (Allow 3-5 working days after the date of request) | | | | | | |
| Please tick where appropriate: | | | | | | |
| O TAX O EMPLOYMENT | O ARMY O IMM | IGRATION | O CIVIL | DEFENC | E | |
| O OTHER (please specify) | | | | | | |
| TRANSCRIPT (Allow 5-10 working days after the date of request) Please tick where appropriate: | | | | | | |
| NUMBER REQUIRED: X € 5,00 = | | | | | | |
| REASON FOR TRANSCRIPT REQUEST (Please tick where appropriate) | | | | | | |
| O TRANSFER TO U.K. UNIVERS | ITY(please spe | cify) | | | | |
| O TRANSFER TO U.S. UNIVERSI | | | | | | |
| O TRANSFER TO A UNIVERSITY IN CYPRUS | | | | | | |
| O FOR EMPLOYMENT | (please spe | :::::::::::::::::::::::::::::::::::::: | • | | | |



| OTHER REQUESTS (please specify) | | | | | |
|---|------------|--|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| UNIVERSITY OF NICOSIA Office Use Only | | | | | |
| REQUEST APPROVED BY THE DEPARTMENT OF FINANCE | | | | | |
| Department of Finance Signature | YES O NO O | | | | |
| Receipt Number Date | | | | | |