F-95 Return from Suspension Form



| STUDENT DETAILS | | | | | | | |
|----------------------|--|--|--------|--------|-------|--|--|
| Student Name: | | | | | | | |
| Date of Birth: | | | Studer | nt ID: | | | |
| Full Address: | | | | | | | |
| Phone: | | | Email: | | | | |
| COURSE DETAILS: | | | | | | | |
| Course Code and Name | | | | | | | |
| CoE Number | | | | | | | |
| Student Signature: | | | | | Date: | | |

| For Office Use Only | | | | | | | | |
|--|--|-----------|--|----------------------------|------|-----|--|--|
| Student provided with a new study | | Yes | | PRISMS Commenced | | Yes | | |
| plan? | | No | | | | No | | |
| | | NA | | | | NA | | |
| Date of Provision: | | | | Date of | | | | |
| | | | | Commencem | ent | | | |
| Student provided with an updated payment plan? | | | | Payment plan updated by | | | | |
| Processing Staff Name | | Signature | | | Date | | | |

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