retake offer reply form

To be completed and returned by email to **student.records@falmouth.ac.uk**

| Name: |  |
| --- | --- |
| Student number |  |
| Course: |  |
| Modules to be retaken: |  |
| Expected return date: |  |

[ ]  I wish to accept the Assessment Board offer to retake the modules specified above.

 I confirm that I am happy with the following:

* that a retake can only be offered once per course of study
* that I will need to fully engage with each of the modules being retaken
* that I will need to retake all assessments within each of the modules being retaken, and submit new work. Any passing marks I previously achieved in these modules will be surrendered
* that I am aware of the financial implications of a retake

**OR**

[ ]  It is not my intention to return to continue my studies and I wish to withdraw from Falmouth University. I confirm that I am aware of the academic and financial implications of my decision.

Signature: ……………………………………………………………………………………………………………………………….

Print name: ………………………………………………………………………………………………………………………………

Date: …………………………………………………………………………………………………………………………………………