INTERNATIONAL UNIVERISTY
SCHOOL OF BUSINESS

SOCIALIST REPUBLIC OF VIETNAM
Independence – Freedom – Happiness

REQUEST FORM

Dear:

- **Office of Undergraduate Academic Affairs**
- **School of Business**

Student's name: - Student's ID:

Email: - Phone:

Semester: - Academic year: 20…… - 20

ADD				DROP			
No	**Course ID**	**Course Name**	**Group**	**No.**	**Course ID**	**Course Name**	**Group**
1				1			
2				2			
3				3			
4				4			
5				5			
6				6			
7				7			
8				8			

Reason:

Date: …/…./…….

Student's signature

FOR ADVISOR

Date: …/…/……

Signature:

SCHOOL OF BUSINESS

Date of receipt: …/ …/ …….

Date of response: …/ …/ …….

Signature: