



Cardiff  
Metropolitan  
University

Prifysgol  
Metropolitan  
Caerdydd

## Cancellation Form

Consumer Contracts Regulations 2014

**Complete and return this form only if you wish to withdraw your place**

To

Cardiff Metropolitan University, Western Avenue, Cardiff, CF5 2YB:

I hereby give notice that I wish to cancel my place and therefore my contract at Cardiff Metropolitan University for:

**Course Name:** \_\_\_\_\_

**Accepted on** (*insert date of acceptance of place on course*): \_\_\_\_\_

**UCAS Personal ID/Application Number:** \_\_\_\_\_

**Name of applicant:** \_\_\_\_\_

**Address of applicant:** \_\_\_\_\_

**Signature of applicant** (*only if this form is notified on paper*): \_\_\_\_\_

**Date:** \_\_\_\_\_