

EXCHANGE PROGRAMME

GRADE RELEASE FORM

| l, Full Name | |
|---|--|
| enrolled on DCU's Exchange Programme | through Exchange Partnership with (enter |
| your Home University Name): | |
| for the period from (enter Exchange dates | below) |
| (Day/Month/Year) | to |
| • | ange Office at DCU to release my official ripts to my Home International Office, for Report with my Home University. |
| Student Signature | Witness Name |
| | Witness Signature |
| Date Date | |