

### STUDENT DEFERMENT APPLICATION FORM

**INSTRUCTIONS**

1. Student is required to fill in the accurate information in the provided section.
2. Completed form must be submitted to Admission and Records Department / respective Programme Coordinators (RC's Students).
3. International Student is **COMPULSORY** to liaise with International Student Department for student visa related matters.
4. Student with outstanding fee is required to settle the outstanding amount before the consequent semester commences.

Full Name (CAPITAL LETTER)																					
Matric No.																					
Programme																					
Mailing Address <small>(PLEASE NOTE THAT YOUR WITHDRAWAL LETTER WILL BE MAILED TO YOU AT THIS ADDRESS)</small>																					
Contact No.				-																	

Effective Deferment: Semester \_\_\_\_\_ (e.g: January 2023)

### REASON FOR DEFERMENT

(Please tick ✓)

<input type="checkbox"/> Financial Problem	<input type="checkbox"/> Unable to Cope with The Course Taught	<input type="checkbox"/> Extensive workload
<input type="checkbox"/> Personal Matters	<input type="checkbox"/> Medical Problem	<input checked="" type="checkbox"/> Other: (Please Specify)

\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student's Signature

### FOR OFFICE USE ONLY

Admission and Records Department	
Comment :	
_____	
_____	
Signature & Stamp : _____	
Date : ____/____/____	
Period of Deferment:	
<input type="checkbox"/> Add/Drop Period	<input type="checkbox"/> After Add/Drop Period

**A) International Office (International Student Only)**

1. Flight ticket

Yes     No

Comment:

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Signature & Stamp \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**B) Consultation With Programme Leader**

I have consulted the student on the possible consequences with regards to the deferment. Below is my comment (*COMPULSORY to fill up*).

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Signature & Stamp \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**C) Consultation With Dean/Director of Faculty or Head of Regional Centre (where applicable)**

I have consulted the student and the programme leader on the possible consequences with regards to the deferment. Below is my comment (*COMPULSORY to fill up*).

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Signature & Stamp \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**D) Student Finance Services Department**

Scholarship     Non-Scholarship

Please Specify : \_\_\_\_\_

Balance Outstanding : RM \_\_\_\_\_

Comment :

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Processed by:

Verified by Head:

\_\_\_\_\_  
Signature & Stamp

\_\_\_\_\_  
Signature & Stamp

Date \_\_\_\_/\_\_\_\_/\_\_\_\_