Singapore Polytechnic

Submit this form together with relevant supporting documents directly to your Academic School.

APPLICATION FOR DEFERMENT OF STUDIES

This form may take you 5 minutes to complete. You are advised to read the following notes carefully before completing the form. The data and documents provided to Singapore Polytechnic will be kept strictly confidential and used for the purpose of this application only. Thank you.

1. Refund of Fees: Students deferring from SP are liable to pay fees depending on when the deferment is submitted. See the table below. New students deferring before the commencement of the semester are also liable for an administrative fee of $50.

Deferment Date	Tuition Fees	Students' Union Entrance and Subscription Fees	Other Fees
Before commencement of semester	Full refund	No refund	Full refund
Within the 1st week	Refund 75%	No refund	Full refund
After the 1st week	No refund	No refund	No refund

2. Students are to submit this form together with supporting documents (e.g. doctor's medical report, etc.) directly to their Academic School.   This application would not be processed without the relevant supporting documents.
3. Students are to talk to their Personal tutor & Course Chair before submitting the form.
4. The form must be submitted before the commencement of the examinations.

Part I: To be completed by student	
Name:	
Admission No.:	Course:
Contact No.:	Email:

I wish to apply for deferment for: **(Please check the appropriate box)**

Duration: ☐ 1 Semester: AY____/____ Sem____ ☐ 2 Consecutive Semesters: AY____/____ Sem____

and   AY____/____ Sem____

I will return to continue with my studies in AY____/____ Sem____.

Reason for application: **(Please attach supporting documents)**

Declaration: I have read and understood the following.

I confirm that the particulars and information furnished in this form and all accompanying documents are true and accurate to the best of my knowledge, and I have not wilfully suppressed any material fact. I understand that disciplinary action will be taken against me if any of the supporting documents is found to be untrue.

Signature of Student: _____   Date: _____

Name and Signature of Parent: _____   Date: _____
(if student is under 21)

Part II: To be completed by Personal Tutor

| Name of Personal Tutor | Signature | Date |

Part III: To be completed by Course Chair

Decision: This student's application for deferment of studies is:

(Please ✓):

☐ **SUPPORTED FOR 1 SEMESTER**   ☐ **SUPPORTED FOR 2 CONSECUTIVE SEMESTERS**

☐ **NOT SUPPORTED**

Reason/ Remarks :

| Name of Course Chair | Signature | Date |

Part IV: To be completed by Director of Academic School

Decision: This student's application for deferment of studies is:

(Please ✓):

☐ **APPROVED**   ☐ **NOT APPROVED**

Reason/ Remarks :

| Name of Director | Signature | Date |

Part V: To be completed by Admissions Office

Comments by Admissions Manager:	Record updated in SAS:
	Name / Date: _____
	☐ Letter sent to inform student
	☐ Copy of letter sent to School/INP/LIB/SS/ED
Name / Date: _____	☐ Student File