



**APPLICATION FOR COURSE TRANSFER**

*Before you fill in Part II of this form, please consult your Personal Tutor or any of your lecturers.*

**Part I: To be completed by Personal Tutor or lecturer AFTER meeting with student**

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|---|----------|
| 1. Does the student have difficulty coping with his/her current course?<br>If yes, please elaborate below.      | Yes / No |
| 2. Does the student have problems with his/her course mate(s)/class mate(s)?<br>If yes, please elaborate below. | Yes / No |
| 3. Does the student have problems with his/her lecturer(s)?<br>If yes, please elaborate below.                  | Yes / No |
| 4. Does the student have any other reason for course transfer?<br>If yes, please specify below.                 | Yes / No |

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\_\_\_\_\_ Name of Staff

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

After you have seen your Personal Tutor or lecturer, you may proceed to complete this form. 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. This form is for current students who wish to apply for transfer to another course. Students who are not permitted to continue with their current course are not eligible to apply for transfer.
2. Students must complete and submit this form to the Student Service Centre at least 1 week before the start of the new semester. This will enable them to start the new course no later than the 3<sup>rd</sup> week if the application is successful. **Late applications may not be accepted.**
3. The application is assessed based on merit and suitability and is subject to available vacancies in the new course.
4. Tuition Grant (TG) eligibility is capped at a maximum of 10 semesters and this includes all TG received in the current course.
5. Students must continue to attend classes in their current course pending the outcome of their application.

**Part II: To be completed by student and submitted to the Student Service Centre, T16, Level 1**

Name: \_\_\_\_\_

Admission No: _____	Current Course: _____
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Contact Number: _____	Email: _____
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I wish to apply to transfer to the Diploma in \_\_\_\_\_

<b>Reason for application:</b>	<b>Please attach supporting documents (if any)</b>
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<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
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<p>_____</p> <p>Signature of Student</p>	<p>_____</p> <p>Name and Signature of Parent (if student is under 21)</p>	<p>_____</p> <p>Date</p>
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