

DEFERMENT FORM

APPLICANT PARTICULARS

Name

Matric No.

Telephone No.

Programme : _____

Intake Session : _____ Deferment Session : _____

Grade Point Average (GPA) : _____ Cumulative Grade Point Average (CGPA) : _____

Reason for Deferment : _____

Signature : _____ Date : _____

(1) CENTRE FOR GRADUATE STUDIES <small>(For Postgraduate Student)</small>	(2) INTERNATIONAL OFFICE <small>(For International Student)</small>	(3) FACULTY <small>(All Students)</small>
Signature & Verification Date : _____ Remarks : _____	Signature & Verification Date : _____ Remarks : _____	Signature & Verification <small>(Programme Coordinator / Academic Deputy Dean)</small> Date : _____ Remarks : _____
(4) STUDENT FINANCE UNIT	(5) REGISTRAR	(6) RECORD, EXAMINATION & CONVOCATION DEPARTMENT
Signature & Verification Date : _____ Remarks: _____	Signature & Verification Date : _____ Remarks : _____	Signature & Verification Date : _____ Remarks : _____

*(Note: You are required to get approval according to the order of numbers) * Applicable after Lecture Week 9*

