

STUDENT REQUEST FORM

| | | |
|-------------|-----------|-----------------|
| Full Name: | | NRIC No.: |
| Intake No.: | | Student ID No.: |
| Address: | | |
| Tel (H): | Tel (HP): | Email: |

Description of Request:

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Note: The processing time will take between two days to two weeks, depending on the requirement specified.

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Student's Name & Signature **Date**

** Only duly completed forms will be processed.*
** Please write in English.*
** Students under the age of 18 requesting for withdrawals, deferments or refunds must submit a letter of consent from their parent / guardian.*

FOR OFFICIAL USE ONLY

RECEIVED BY:

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| | | |
|---------------------------|--------------------------------|------|
| Name of Course Consultant | Signature Of course Consultant | Date |
|---------------------------|--------------------------------|------|

Action taken:

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Action taken by:

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|------|-----------|------|
| Name | Signature | Date |
|------|-----------|------|