

APPLICATION FOR DEFERMENT

INSTRUCTIONS:

1. This form is to be completed by students requesting for a deferment of module(s)/course within valid grounds.
2. **The application for deferment must reach PSB Academy at least 2 weeks before the commencement date of module/course.**
3. All requests must be supported by relevant documentary evidence and payment of an administrative fee of \$58.00 (incl. GST).
4. Company sponsored students must attach written approval from their company.
5. Incomplete applications without relevant attachments will not be processed.
6. **The Fee Protection Scheme (FPS) and Medical Insurance Scheme (MIS) fees (where applicable) will apply after the original programme end date. Student will be informed of the fees payable and due date in writing.**

Note to Grant Applicants

- Approval of deferment by PSB Academy does not automatically warrant student extension of grant duration by the respective grant body.
- It is the onus of the student to inform the respective grant body for extension of duration once deferment is approved and furnish PSB Academy with a carbon copy of the correspondence outcome with the grant body.
- Grant bodies may at their sole discretion disallow the deferment of modules.
- **In cases whereby the grant body disallow deferment of modules and extension of course duration, students can either continue on with the course without the deferment to continue to enjoy the funding or alternatively, pay up the supported amount of course fee in order to continue with the course with deferment.**

SECTION A: DEFERMENT DETAILS (*Please ✓ accordingly)					
Name of Student					
NRIC / FIN / Passport No. (Include prefix)		Student No.		Batch No.	
Mobile Phone	Office Tel	Home Tel	Email		
Mailing Address (It will be defaulted to the company if student is company sponsored)					
Programme Title			Commencement Date Of Programme		
Module Title			Commencement Date of Module		
Type Of Sponsorship*	<input type="checkbox"/> Self-Sponsored		<input type="checkbox"/> Company Sponsored		
Type of Funding*	<input type="checkbox"/> None	<input type="checkbox"/> SEP	<input type="checkbox"/> SDF	<input type="checkbox"/> CDAC	<input type="checkbox"/> Others
Type Of Deferment*	<input type="checkbox"/> To Next Available Intake		<input type="checkbox"/> To Next Available Module		
Reasons for Deferment*					
<input type="checkbox"/> Medical Grounds (attach medical certificate)					
<input type="checkbox"/> Reservist Training (attach SAF-100)					
<input type="checkbox"/> Official Overseas Assignment (attach letter from company verifying the trip)					
<input type="checkbox"/> Others (attach written letter of explanation/supporting documents)					
I declare that the information given is true and accurate to the best of my knowledge and I have not willingly suppressed any information					
_____			_____		
Signature of Student			Date		
FOR OFFICIAL USE					
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved					
_____			_____		
Approving Officer's Name & Signature			Date		

NB: All information provided are treated with strictest confidentiality and are meant for internal use only.