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Co. / GST Reg. No. 200704825E

ABSENCE FROM MAIN EXAMINATION

INSTRUCTIONS:

1. This form is to be completed to obtain approval for a deferred main examination if the student is unable to attend the main examination.
2. The application must be receive by PSB Academy **prior or no later than 4 working days after the date of examination**. Supporting documentation(s) must be enclosed with all application.
3. Deferred examination is based on the marks weightage of coursework and examination as indicated in the module. Please refer to the student handbook for your programme assessment grading.

SECTION A: COURSE DETAILS

Course Title	Course Code
Module Title	Date of Main Examination

SECTION B: STUDENT'S PARTICULARS *(*Please tick accordingly)*

Name			NRIC/FIN No.
Mobile Phone	Office Tel	Home Tel	Email
Mailing Address			
Name of Company			Sponsorship* ☐ Company-sponsored ☐ Self-sponsored
Address of Company			

Reasons for Absence*

- ☐ Medical Grounds (attach medical certificate)
- ☐ Reservist Training (attach documentary proof)
- ☐ Official Overseas Assignment (attach letter from company verifying the trip and the duration)
- ☐ Bereavement of Parent/Spouse/Child (attach death certificate)
- ☐ Others (attach details)

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 – ACKNOWLEDGMENT *(This slip will be returned to student upon confirmation)*

Your request for authorised leave of absence is:

☐ **Approved**. This deferred main examination will be considered as your **first and final attempt**. If you fail to attend or pass this examination, no further examination will be granted and you are required to re-module if you wish to complete the course. **Under no circumstances will a student be given a deferment for deferred examination**. Details if the examination is as follows:

Date : _____

Time : ☐ 9:30am – 12:30pm ☐ 2:00pm – 5:00pm

Venue : ☐ PSB Academy Campus @ Delta ☐ PSB Academy Campus @ Henderson

(Please be at least 15 mins earlier during your examination date to check for the classroom allocated)

☐ **Not approved**. In order to complete the course, you are required to re-enrol for the module.

Approving Officer's Name and Signature _____ Date _____

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

edutrust SINGAPORE
Cert No: EDU-2-2005
Validity: 20/05/2010 - 19/05/2014