



UNIVERSITI KUALA LUMPUR REQUEST TO DEFER STUDY

Note that deferment request due to other than health problem after week 9 is not allowed under University Rules and Regulations. Student must complete Section A,B and C before meeting Academic Advisor

SECTION A : STUDENT'S INFORMATION

Name : _____ ID : _____
 Ic Pasport : _____ Contact No : _____
 Programme : _____
 Institute : _____ Email Address : _____
 Correspondence : _____
 Address : _____ This address is the same in our record : Yes No
 _____ (Circle)

If you change your address during the period of deferment, please contact us to ensure your address details are update for future correspondence.

1. Reason to defer study :

<input type="checkbox"/> (12) Health Problem	<input type="checkbox"/> (26) Financial Difficulties
<input type="checkbox"/> (15) Personal Problem	<input type="checkbox"/> Others _____
<input type="checkbox"/> (11) Job Offer	

2. Do you intend to study at another institution outside UniKL? Yes No (Circle)

3. If YES -

Have you application for subject equivalency between UniKL and the host University been approved? Yes/No (Circle)

4. To be completed by Finance Department

Current Outstanding Debts : RM _____ as at(date) _____ Signed _____

SECTION B : APPLICATION DETAILS

1. I would like to discontinue my study with effect from (date) _____

SECTION C : STUDENT'S DECLARATION

1. I declare that the information supplied in this form and the information given in support of my application is correct and complete.

2. I understand that this deferment may have an effect on my study duration and loan status.

3. I understand that all assessment submitted to the lectures will be removed from my records and no grades shall be awarded for the subjects attended until the point of my deferment effective date.

Circle		Initial
Yes	No	
Yes	No	
Yes	No	

Student's Signature : _____ Date : _____

Note : Attach supporting letter or document. *Please circle where applicable Regardless of any week, grade 'W' will be given to all subjects if defer within week 5 - 9.

SECTION D : FOR ACADEMIC ADVISOR'S RECOMMENDATION

Signature : _____ Date : _____

For UniKL Use Only

Findly ensure all information are provided and complited before approvinf this application especially Section A- C. Section D can be completed by Counselor/authorised by the Institute in the absense of Academic Advisor.

SECTION E : Dean Approval

Approve Not Approve

Dean's Signature & Official Stamp _____ Date : _____

SECTION F : Academic Services (Enrolment and Records)

Received Date :

	Process Checklist	Date	Sign
√	Drop/Withdraw all subjects		
1	Change Status		
2	Send Approval Letter		
3			