



APPLICATION FOR DEFERMENT OF STUDY
(PRE-UNIVERSITY AND UNDERGRADUATE PROGRAMMES)

1. Application

Application is to be made on the prescribed form and submitted to the respective Faculty/Centre/Branch Campus/Branch.

2. Reason for Application

Applicants are required to state the circumstances for their application for deferment of study and provide the relevant supporting documents.

3. Deadline for Application

Application must be received by the respective Faculty/Centre/Branch Campus/Branch latest by:-

Bachelor Degree & Diploma	: end of week 14 (for long semester)/ week 7 (for short semester) of the Semester.
Foundation & A Level	: end of week 12 of the Semester.

Late applications will **NOT** be considered for deferment in the same semester.

4. Application Outcome

Application submitted before the deadline may not necessarily be considered for deferment in the same semester. Application for deferment of study including Dual Award (if applicable) is subject to the approval of the University College. The Department of Admissions and Credit Evaluation will notify the students on the outcome of their application via email.

5. Transfer of Fee

Tuition fee paid for the current semester will be transferred to the semester when the students resume their study if the application for deferment of study is received by the UC before end of week 4. There shall be NO transfer of fee thereafter.

The fee transferred is strictly non-refundable and non-transferable if the students withdraw from the programme or do not resume their study after the deferment period.

There will be NO transfer of fee if the application for deferment of study is received by the UC after week 4.



KOLEJ UNIVERSITI TUNKU ABDUL RAHMAN

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APPLICATION FOR DEFERMENT OF STUDY
(PRE-UNIVERSITY AND UNDERGRADUATE PROGRAMMES)

Name: _____ Registration No.: _____

Contact Number: _____ Personal E-Mail : _____

Programme: _____ Campus : _____

Current Year & Semester of Study: _____

On Dual Award Programme: No Yes, Partner University: _____

(to be filled in by Bachelor Degree student only)

I would like to defer my study as follows:-

From: _____ Semester, Year _____

To : _____ Semester, Year _____

To repeat/resit failed course(s) during deferment period: No Yes

Reason(s) for deferment (use a separate sheet if necessary):-

I attached herewith relevant documents (e.g. medical report or other relevant documents) to support my application.

I declare that all information given is true and complete. I understand that the University College reserves the right to reject my application or withdraw any approval given if any information given by me is found to be not true or incomplete.

Signature: _____ Date: _____

FOR OFFICE USE

Date received by the Faculty/Centre/
Branch Campus/Branch:

Date received by the Department of Admissions
& Credit Evaluation:

FOR OFFICE USE

A. To be completed by the Faculty/Centre/Branch Campus/Branch

No. of failed/outstanding course(s)		CGPA	Student's current status		Change in programme structure
Repeat course(s)	Resit course(s)		TAR UC	Dual Award	
					Yes () No ()

Officer's Signature & Stamp: _____ Date: _____

B. Comments/Recommendation/Approval

(i) Comments/Recommendation by Associate Dean/Head of Division/Programme Leader

Comments: _____

Signature & Stamp: _____ Date: _____

(ii) Recommendation/Approval by Dean/Deputy Dean of Faculty/Head of Centre/Branch Campus/Branch

Recommended/Approved for Deferment from session _____ to _____. Rejoin: _____

Full Deferment

Deferment but resitting/repeating failed course(s) during deferment period

For students on Dual Award, deferment including Dual Award Yes No

Not Recommended/Not Approved

Comments: _____

Signature & Stamp: _____ Date: _____

C. Action by Department of Admissions & Credit Evaluation

(i) Transfer of Fee: Yes No

Letter prepared by: _____ Date: _____

Remarks: _____

(ii) TIAS Update:

Status: _____ Rejoin session: _____ Updated by: _____ Date: _____