

**COURSE DEFERMENT FORM**

**Section A: COURSE INFORMATION**

Course Enrolled	
Commencement Date of Course	Course End Date

**Section B: STUDENT'S PARTICULARS**

Name of Student			
Nationality	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Mailing Address		Postal Code	
Hand Phone No.	House Tel. No.	E-mail Address	

**Section C: APPLICABLE TO STUDENT UNDER THE AGE OF 18 ONLY**

Parent's/Guardian's Name	
Mailing Address	
E-mail Address	Contact No.

**Section D: COURSE DEFERMENT INFORMATION**

Please state the course intake you want to transfer:  
*(Deferment is only allowed before the commencement date)*

**Section E: REASONS FOR COURSE DEFERMENT**

State your reasons for course deferment:

**Section F: DECLARATION BY STUDENT**

I declare that the information given is true and accurate to the best of my knowledge and I have not willingly suppressed any information. I am fully aware of the school's current deferment policy and refund policy.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section F: ACKNOWLEDGEMENT OF STUDENT (to be filled by student once result is released)**

I \_\_\_\_\_ acknowledge the course deferment from \_\_\_\_\_ (*course intake*) to \_\_\_\_\_ (*course intake*)

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

**COURSE DEFERMENT STATUS**

Approved       Rejected

Principal's Signature: \_\_\_\_\_  
Date : \_\_\_\_\_  
Deferred to : \_\_\_\_\_ (new course intake date)

**FINANCE DEPARTMENT**

Amount to be refunded (if applicable) : \_\_\_\_\_  
Name of Approving Director : \_\_\_\_\_  
Signature of Approving Director : \_\_\_\_\_ Date : \_\_\_\_\_

**For Official Use Only**

Received By  
Name & Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Parent's Letter of Consent (if under 18 yrs. Old)  
Date: \_\_\_\_\_  
\* If letter of consent was not attached to this form

Submit to Principal for review and approval  
Date: \_\_\_\_\_

Submit to Finance Department for refund (if applicable)  
Date: \_\_\_\_\_

Inform the student  
Date: \_\_\_\_\_

Inform relevant parties (FPS, Bank, ICA and/or CPE)  
Date: \_\_\_\_\_

**COURSE DEFERMENT FORM**

**COMPUTATION OF THE REFUND**

I \_\_\_\_\_ acknowledged that I understand the computation of my refund from Genetic Computer School.  
**<Student Full Name>**

**Date acknowledged:** \_\_\_\_\_