

Please read the following instructions and notes carefully before submitting the deferment request form:

1. Please submit the completed form with the supporting documents and deferment application fee of **\$214.00** to the School at 100 Orchard Road #04-100 Concorde Hotel Singapore 238840 or via email at studentservices@aventisglobal.edu.sg at least 14 days prior to module/course commencement. Request submitted after commencement of course will not be entertained.
2. Should the student choose to defer after the commencement of the module/course, approval of deferment is subjected to the School/University.
3. The review process will not take more than four (4) weeks
4. The outcome will be notified via email

SECTION A : DEFERMENT DETAILS	
Name of Student	NRIC/FIN/Passport No.
Student ID (If any)	Date of Birth (DD/MM/YYYY)
Email	Mobile Phone
Mailing Address	
Awarding Institution <i>(Please circle where appropriate)</i> Kingston University/University of Derby/University of Roehampton/Aventis School of Management	Commencement Date of the course (DD/MM/YYYY)
Course Title	Date of Return to Study (DD/MM/YYYY)
Reasons for Deferment (Please tick accordingly) <input type="checkbox"/> Medical grounds (attach medical certificate) <input type="checkbox"/> Reservist training (attach SAF - 100) <input type="checkbox"/> Official Overseas Posting (attach company letter) <input type="checkbox"/> Others (attach written letter of explanation and relevant supporting documents) :	
<p>I understand the following</p> <p>(a) that this request will be considered solely on the basis of the information above and the documents provided</p> <p>(b) that the result of this request is final,</p> <p>(c) that the request is not automatically granted and it is my responsibility to follow up with the institution on the status if my request is granted.</p> <p>I hereby enclose the deferment application fees of \$214.00 (inclusive of GST) and agree to accept that the decision of the deferment application as final.</p> <p>I agreed to bear all consequences resulting from this deferment.</p>	
Signature of Student _____	Date _____

SECTION B : FOR OFFICIAL USE ONLY

Request for deferment is:

Approved

Not Approved

Remarks:

_____ Date _____

Academic Director's Name and Signature

SECTION C : APPEAL OF REJECTED DEFERMENT (IF APPLICABLE)

Appeal request for deferment is:

Approved

Not Approved

Remarks:

_____ Date _____

Chairman of Academic Board's Name and Signature