

**CENTRE FOR GRADUATE STUDIES
 UNIVERSITI TUN HUSSEIN ONN MALAYSIA
 APPLICATION FOR DEFERMENT OF REGISTRATION**

Dean,
 Centre for Graduate Studies,
 Universiti Tun Hussein Onn Malaysia
 Tel: +607- 074564849

Dear Professor,

APPLICATION FOR THE DEFERMENT OF REGISTRATION TO UTHM POSTGRADUATE PROGRAMME
 SEMESTER _____ SESSION _____ / _____

The offer letter dated _____ for admission to the postgraduate program at Universiti Tun Hussein Onn Malaysia is hereby acknowledged and referenced.

I hereby submit a formal request to defer my registration for matriculation in the postgraduate program at Universiti Tun Hussien Onn Malaysia to Semester _____ Session _____ / _____.

SECTION A: STUDENT'S PARTICULARS																
*THIS SECTION IS TO BE FILLED IN CAPITAL LETTERS																
NAME	:	_____														
NRIC / PASSPORT NUMBER	:	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table>														
STUDENT MATRIC NUMBER	:	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table>														
MODE OF STUDY	:	<input type="checkbox"/> RESEARCH <input type="checkbox"/> COURSEWORK <input type="checkbox"/> MIXED MODE														
SECTION B: REASON FOR THE REGISTRATION DEFEREMENT																
*A BRIEF REASON ON THIS APPLICATION IS KINDLY REQUESTED.																
_____ _____ _____																
_____ <i>STUDENT'S FULL NAME AND SIGNATURE</i>		_____ DATE														
SECTION C: APPROVAL FROM THE DEAN OF CENTRE FOR GRADUATE STUDIES																
<input type="checkbox"/> APPROVE <input type="checkbox"/> DECLINE	<i>Signature and Official Stamp</i>	CGS'S COMMENTS /REMARKS DATE : _____														