

CENTRE FOR GRADUATE STUDIES
UNIVERSITI TUN HUSSEIN ONN MALAYSIA
POSTGRADUATE STUDY DEFERMENT APPLICATION FORM

(This form is to be filled in TWO (2) copies)

SECTION A: STUDENT AND DEFERMENT DETAILS	
NRIC / PASSPORT NUMBER	: <input style="width: 100%;" type="text"/>
MATRICULATION NUMBER	: <input style="width: 100%;" type="text"/>
FULL NAME	: _____
FACULTY	: _____
ACADEMIC PROGRAMME	: _____
SEMESTER	: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III SESSION <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
TYPE OF REGISTRATION	: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME
MODE OF STUDY	: <input type="checkbox"/> RESEARCH <input type="checkbox"/> COURSEWORK <input type="checkbox"/> MIXED MODE
PROPOSED DURATION	DEFERMENT : <input type="checkbox"/> ONE SEMESTER <input type="checkbox"/> TWO SEMESTERS SEMESTER <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> SESSION <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>
DURATION OF YOUR PREVIOUS SEMESTER DEFERMENT	: <input type="checkbox"/> ONE SEMESTER <input type="checkbox"/> TWO SEMESTERS <input type="checkbox"/> THREE SEMESTERS <input type="checkbox"/> NOT APPLICABLE
REASON FOR APPLYING A DEFERMENT OF STUDY	: <input type="checkbox"/> DEFERMENT OF STUDY DUE TO MEDICAL REASONS <input type="checkbox"/> DEFERMENT OF STUDY DUE TO NATIONAL INTEREST REASONS <input type="checkbox"/> DEFERMENT OF STUDY DUE TO PERSONAL REASONS
*Submission of a medical certificate and other evidence is mandatory when applying for the deferment of study due to medical reasons. Medical certificates from private hospitals should be endorsed by UTHM Health Centre.	
ARE YOU THE RECIPIENT OF ANY EDUCATION SCHOLARSHIP OR RESEARCH FUNDING?	: <input type="checkbox"/> YES *The submission of an official statement from the funding bodies, endorsing the approval of study deferment, is mandatory when applying for the deferment of study. <input type="checkbox"/> NO
NAME OF FUNDING BODY	: _____
STUDENT'S DECLARATION	: I hereby confirm that the information provided herein is accurate, correct and document submitted along with this application is genuine. I also hereby acknowledge and understand the financial implication towards the application of the deferment of study.
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> _____ STUDENT'S SIGNATURE </div> <div style="width: 45%; text-align: center;"> _____ DATE </div> </div>	

SECTION B: RECOMMENDATION BY SUPERVISOR (APPLICABLE FOR RESEARCH STUDENT ONLY)			
<p>I hereby acknowledge that the student has engaged in discussions with me regarding his/her application for the deferment of study. I recommend the approval of the said request, as it is deemed academically viable and in adherence to Section 15.1 (Deferment of Study) within the framework of the Postgraduate Studies Academic Regulations.</p>			
_____ SIGNATURE AND OFFICIAL STAMP	_____ DATE		
SECTION C: RECOMMENDATION BY THE FACULTY			
<p>I hereby acknowledge that the faculty has thoroughly reviewed the application, and all documents submitted alongside the application are deemed to be true and genuine. The faculty recommends the approval of the request.</p>			
_____ SIGNATURE AND OFFICIAL STAMP	_____ DATE		
SECTION D: APPROVAL BY 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: _____	
SECTION E: OFFICE USE ONLY			
DEFERMENT SHALL BE COUNTED IN THE NUMBER OF SEMESTER USED	<input type="checkbox"/> YES <input type="checkbox"/> NO	LETTER ISSUED ON: _____	
NUMBER OF REMAINING SEMESTER	<input type="text"/> <input type="text"/>	UPDATED TO SMP:	<input type="checkbox"/> YES <input type="checkbox"/> NO