

**Application for Deferment of Semestral Examination for
Part-time Courses (Not applicable for supplementary
examinations)**

PROCEDURES AND REGULATIONS

1. Please submit this application for deferment of Semestral Examination, together with relevant supporting document/s, to the **Professional Development Centre**.
2. Deferment is only allowed for exceptional circumstances e.g. military training, company's overseas assignment or death of immediate family member etc.
3. Students on medical/hospitalisation leave need NOT apply for deferment of Semestral Examination using this application form. A medical certificate issued by a registered medical practitioner must be submitted to the Professional Development Centre within 48 hours of the last day of the medical leave or the last day of the examination period, whichever is earlier.
4. Students will be notified of their application status within 3 working days. If the application is approved, the student will be able to sit for the Supplementary Examination and his results will be graded.
5. A deferred student who cannot sit for the Supplementary Examination will be treated like a Repeat student. The student must pay a fee for the subject deferred and meet the attendance requirement in order to sit for the Main Examination of the next academic year or when the course is next offered.
6. The Polytechnic reserves the right to disallow the student to sit the Supplementary Examination or take any appropriate action it deems necessary if the information provided by the candidate is found to be false or candidate fails to comply with the rules and regulations of the Polytechnic's Examinations for part-time courses.

Note:

Unless the student has received an official notification from Professional Development Centre approving his application for deferment, he is still required to sit the Main Examination and is subject to all rules and regulations governing the Polytechnic's Examinations for part-time courses.

TEMASEK POLYTECHNIC
Professional Development Centre



**Application for Deferment of Semestral Examination for
Part-time Courses (Not applicable for supplementary
examinations)**

**THE STUDENT MUST READ THE ATTACHED PROCEDURES AND REGULATIONS ON
APPLICATION FOR DEFERMENT OF SEMESTRAL EXAMINATION FOR PART-TIME
COURSES BEFORE COMPLETING THIS FORM**

PART A: To be completed by the student

Name: _____ Adm No: _____ NRIC No: _____

Tel No: (Off) _____ (Res) _____ (HP) _____ (Pgr) _____

Course/Module: _____ Year of Study: _____

Sponsoring Company (if any): _____

I wish to apply for deferment of the following Semestral Examination:

Subject / Module	Examination Date	Reason for Deferment*

***IMPORTANT: Relevant document/s must be attached to support your application**

I declare that:

- The information given is accurate to the best of my knowledge and I have not deliberately omitted any relevant information. I have read, understood and agree to abide by the Procedures and Regulations on Application for Deferment of Semestral Examination for Part-Time Course.
- My company is in support of my application (for candidates applying for deferment due to company's overseas assignment, official letter from company must be attached).

Signature of Student

Date

PART B: To be completed by The Course Co-ordinator (Please tick the relevant box)

Application for Deferment of Semesteral Examination: Supported Not Supported

Remarks:

Name/Signature of Course Co-ordinator

Date

PART C: To be completed by Programme Officer, PDC (Please tick the relevant box)

Application for Deferment of Semestral Examination: Recommended Not Recommended

Reason/s:

Name/Signature of Programme Officer

Date

PART D: To be completed by Director, PDC (Please tick the relevant box)

Application for Deferment of Semestral Examination: Approved Not Approved

Remarks (if any):

Name/Signature of Director

Date

PART E: To be completed by Assistant Programme Officer, PDC

Candidate notified of application status on _____.

If approved, candidate is allowed to sit the Supplementary Examination scheduled from _____
to _____ and his results will/will not * be graded.

Name/Signature of Assistant Programme Officer

Date

* Delete where applicable