

COURSE MODULE CHANGE REQUEST FORM

NOTE: If you are under 18 years of age, the Centre will seek your parent's/guardian's approval prior to processing your request. (*Please delete as required.)

SECTION A: COURSE AND MODULE INFORMATION			
Course Name:			
Module / Subject:			
SECTION B: STUDENT'S PARTICULARS			
Name of Student (as in NRIC/Passport)			Student ID:
*NRIC/Passport No./FIN No.	Nationality	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address			Postal Code
Handphone No.	Residential Tel No.	E-mail Address	
SECTION C: APPLICABLE TO STUDENT UNDER THE AGE OF 18 ONLY			
Parent's/Guardian's Name		Contact No.	
SECTION D: REASON FOR CHANGE (PLEASE ATTACH SUPPORTING DOCUMENTS IF APPLICABLE)			
Please specify below:			
SECTION E: 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			
<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> Signature of Student		_____ Date	
_____ Signature of Parent / Guardian		_____ Date	

NOTE: A letter will be issued to student to reject or to approve the change within 4 weeks.

FOR OFFICIAL USE ONLY	
APPROVAL OF COURSE MODULE CHANGE BY MANAGEMENT TEAM *Please delete as required.	
Outcome: <input type="checkbox"/> Approved	
Outcome: <input type="checkbox"/> Rejected Reason(s) for rejection:	
Approved by: _____	_____ _____
Name & Signature of MT	Date
PAYMENT RECORD AND CALCULATION REMARKS (IF APPLICABLE)	