

INSTITUTE FOR POSTGRADUATE STUDIES

POSTGRADUATE PROGRAMME APPLICATION FOR DEFERMENT

1. The deferment of admission is not allowed for more than 12 months from the registration date stipulated in the offer letter.		
PART I: TO BE COMPLETED BY THE CANDIDATE (Please tick (\checkmark) the relevant)		
FULL NAME:	ID NUMBER:	
PROGRAMME:	FACULTY:	
MODE OF STUDY:	NATIONALITY:	
PERSONAL EMAIL:	MOBILE PHONE NO.:	
DATE OF OFFER LETTER:	INTAKE:	
CORRESPONDENCE ADDRESS:		
REASON FOR DEFERMENT:		
Reason for deferment:		
Programmes by Research only		
		, ,
Defer from: // dd mm yr	Defer to:/ dd mm yr	
Programmes by Coursework/Mixed Mode only		
Defer from Intake:/	Defer to Intake:/	
mm yr	mm yr	
SIGNATURE OF CANDIDATE:		DATE:
SIGNATURE OF CANDIDATE.		DATE
PART II: FOR IPS USE	DATE	SIGNATURE AND OFFICIAL STAMP
INSTITUTE FOR POSTGRADUATE STUDIES		
Received and Verified		

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