



**APPLICATION FOR DEFERMENT OF STUDY
(INTERNATIONAL STUDENT)**

Form No. : **UTM/AMD/02**
Edition : **2**
Effective Date : **1/4/2020**
Page (s) : **2**

SECTION III : TO BE COMPLETED BY UTM INTERNATIONAL OFFICE
{Please tick (✓) in the appropriate box}

Approved Not Approved

UTM International Officer signature & stamp:

Signature : _____ Date : _____

***Please surrender your passport**

SECTION IV : SUPERVISOR RECOMMENDATION (FOR POSTGRADUATE STUDENT - RESEARCH & MIXED MODE) {Please tick (✓) in the appropriate box}

Recommended **Supervisor's comments:** **Signature & Stamp :**
 Not recommended _____
_____ **Date :** _____

SECTION V : APPROVAL BY ASSOC. CHAIR/ DIRECTOR OR COORDINATOR OF THE FACULTY/ SCHOOL {Please tick (✓) in the appropriate box}

Approved **Assoc. Chair/Director/Coordinator** **Signature & Stamp :**
 Not Approved **comments:** _____
_____ **Date :** _____

FOR FACULTY/SCHOOL ACADEMIC OFFICE USE ONLY
{Please tick (✓) in the appropriate box}

Approval : **Approved** **Comments:**
 Not Approved _____

Deferred Semester : _____ - _____ / _____
i.e: Sem 2-2019/2020 _____

Defer Code (AIMS) : **4-Deferment of Study** **Signature & Stamp (TP/PP) :**
(Semester deferred is counted) _____
 7 – Medical Leave **Date :** _____
(Semester deferred is not counted) _____
 o – Special Case _____
(Semester deferred is not counted) _____

Total semester available : _____ **semesters**

Student's final semester : _____ - _____ / _____
i.e : Sem 2-2019/2020

STATUS OF UPDATING AIMS RECORD

Updated by : _____
Date : _____