

Request Form

ALSAUC Student ID: _____

Course Enrolled (Certificate / Diploma / Degree)	Course Code	Intake (QQYYYY)
Full Name (as in Passport / Identity Card)	NRIC/ Fin No./Passport No.	
<input type="checkbox"/> Appeal Result <input type="checkbox"/> Defer Unit(s) <input type="checkbox"/> Defer Examination <input type="checkbox"/> Withdraw from Unit <input type="checkbox"/> Withdraw from Course <input type="checkbox"/> Other _____		

Course/Unit Name (if applicable)	(For Official Use Only)
	Approved by: (Name & Date) _____
	Processed by: (Name & Date) _____

Note: Please refer to our refund policy and miscellaneous fees accordingly (www.alsauc.edu.sg)

Remarks/ Reasons:

Student Signature: _____ Date: _____

(For Official Use Only)

Course Fee Payable at the time of withdrawal: _____	
Course Fee Paid: _____	
Payment due / Refund due: _____	
Payment	Refund (If Applicable)
Cheque/Cash: _____	Cheque/Cash: _____
Receipt No: _____	Signature upon receiving refund: _____ (student)
Date: _____	Date: _____