

New Student Request Form

1. Personal Details

JCUA ID (if applicable):

Title: Dr Mr Mrs Ms Miss Nationality: _____

Full Name: _____

Email address: _____ Contact number: _____

Course title: _____ Intake/Year: _____/_____

2. Type of Request

Extension of Deadline Withdrawal Deferment Other (please specify)

Reasons for request:

3. Refund of Fees (if eligible for a refund)

Conditions for refund: Students have a cooling off period of seven (7) working days from the date on which they sign their contract. Notice of withdrawal must be received in writing from the student within this seven (7) day cooling off period regardless of whether the student has commenced the course. Students must also submit withdrawal notice not more than twenty-one (21) days prior to the course commencement date to be entitled for a refund (subject to the cooling off period provision. Kindly refer to Section 2 of your Student Contract.

Name on bank account: _____

Name of bank: _____ Bank account number: _____

Bank branch: _____ Swift code: _____

Bank address: _____

4. Declaration

I declare that the information provided is true and accurate to the best of my knowledge and that I have not wilfully suppressed any information. I understand that information contained in this form is collected for enrolment and administrative purposes, and that some information may be released for administrative purposes. Personal information will not be passed on to any other external bodies without prior authorisation or consent unless a valid legal request has been made.

Extension of deadline request: I understand that the enrolment of the course will be affected should I not meet any conditional requirement to join the course.

Withdrawal request: I understand that all enrolled subjects and course will be withdrawn and my student pass, if applicable will be cancelled accordingly.

Deferment request: I understand that I am allowed to defer only to the next available intake and I should resubmit my application should the deferment is more than one intake where prevailing fee structure and admissions requirements will apply at the time of application.

Refund request: I understand that any refund of my course fees, if any, are subjected to the conditions stipulated under Section 2 of my Student Contract.

Student signature: _____ Date ____/____/____

5. Return Details

James Cook University, Singapore
149 Sims Drive, Block A, Reception (A1-01)
Tel: +65 6709 3888 Email: admissions-singapore@jcu.edu.au

Form received by:

JCU Staff: _____ Signature: _____ Date ____/____/____

6. Recommendation by Director Admissions, Academic Services, and Progression

Recommended for approval Not recommended for approval

Comments: _____

Signature: _____ Date ____/____/____

7. Approval by Campus Dean

Approved Rejected

Comments: _____

Signature: _____ Date ____/____/____

8. Approval by Finance (for refund request only)

Recommendation by Manager / Director, Finance

Refund: Yes No

Signature: _____ Date ____/____/____

Refund Details

Description	Amount (S\$)
Tuition Fee	
Others, please specify:	
Less: FPS cancellation	(S\$ 25.00)
Less: Bank charges	
Total amount refundable	

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