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| Course Transfer Request Form |

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| Section 1 : student’s information |

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| Name  | : |  |
| Student ID/Fin No.  | **:** |  |
| Course Enrolled | **:** |  |
| Course Transferring to | **:** |  |

Declaration

I hereby confirm my intention to withdraw from the course I am currently enrolled in for the purpose of transferring to another course as stated above. I acknowledge that application for this transfer is subject to the approval of **Hanbridge Institute**.

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| Student’s Signature |  | **Date** |

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| Section 2 : request details |

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| Course Transferring to  | : |  |
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| Reasons for Transfer (Through Interview Session) |
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| Section 3 : pre-course counselling |

**Details of Issues Discussed**

🞏 Student has been briefed on course information (course duration, structure, intakes, assessment and assessment schedules, entry requirements, English proficiency requirements, module synopsis, course syllabi, etc.), including course counseling to match the aspirations of the student with course learning outcomes

🞏 Student has been briefed on promotion and award criteria, including the type of certification that will be awarded and the opportunities for further education / graduation opportunity

🞏 Student has been briefed about student pass applications and procedures consisting of registration, collection, renewal, cancellation and online applications

🞏 Student has been briefed about attendance policy. Minimum requirement of 90% attendance for international students and 75% for local students

🞏 Student has been briefed on the refund, withdrawal and transfer policy

🞏 Student has been briefed on tuition fees, payment schedule and other applicable miscellaneous fees payable to the Institute

🞏 Student has been briefed on the different methods of payment (Cash, Internet Banking, Cheque)

🞏 Student understands that the first payment can only be made after the Student Contract has been duly signed

🞏 Student understands the FPS provided by the Institute

🞏 Student understands the terms and conditions of the Student Contract

🞏 Student has been briefed on the compulsory insurance scheme provided by the Institute

🞏 Student has been directed to CPE’s official website ([www.ssg.gov.sg](http://www.ssg.gov.sg)) if they need to find out detailed information

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| **Student Declaration****I am satisfied / unsatisfied\* (please delete where appropriate) with the pre-course counseling that I have attended.** **I hereby acknowledge and certify that the above information has been clearly communicated to me.**  |
| **Date** | **:** |  |  **Signature** | **:** |  |

Acknowledgement by Staff within 2 days

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| Section 4: for official use only |

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| **Receipt of Document Submission** **Please ensure that relevant educational certificates were provided by the student, and an accompanying parent’s consent was given with the application if the student is below 18 years old.** |

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| **Name** | **:** |  | **Designation** | **:** |  |
| **Date** | **:** |  | **Signature** | **:** |  |

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| section 5: approval by Academic Department |

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| **Transfer Request is** | **:** | 🞏 Approved | 🞏 Rejected |
| **Name** | **:** |  | **Designation** | **:** |  |
| **Date** | **:** |  | **Signature** | **:** |  |

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| section 6: approval by mAnagement |

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| **Transfer Request is** | **:** | 🞏 Approved | 🞏 Rejected |
| **Name** | **:** |  | **Designation** | **:** |  |
| **Date** | **:** |  | **Signature** | **:** |  |

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| Section 7: outcome of appeal (iF REQUEST WAS REJECTED) |

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| **Appeal is** | **:** | 🞏 Approved | 🞏 Rejected |
| **Approver’s Name** | **:** |  | **Designation** | **:** |  |
| **Date** | **:** |  | **Signature** | **:** |  |