

Change of Student Status

WITHDRAWAL



MDIS
Management Development
Institute of Singapore

Where lifelong learning begins

Name of Student	Batch No.
Student ID (SID)	Nationality
Contact Number(s)	
Email	

I, _____ (SID : _____), wish to
withdraw from my studies due to _____

I understand and agree to the following terms and conditions:

- All application and membership entrance fees paid to the Management Development Institute of Singapore Pte Ltd are non-refundable. Only the paid course fees are refundable on the following conditions:

% of (amount of the fees paid as per MDIS-Student Contract)	If Student's written notice of withdrawal is received
75%	More than 60 days before the Course Commencement Date
25%	before, but not more than 60 days before the Course Commencement Date
10%	after, but not more than 7 days after the Course Commencement Date
5%	More than 7 days after the Course Commencement Date, but not more than 14 days after the Course Commencement Date
0%	More than 14 days after the Course Commencement Date

A cooling-off period of seven (7) working days is applicable for a maximum refund from the date when the contract was signed

- Student shall be liable for any fee waivers, promotional rates, or any other fees, as per MDIS withdrawal policies. In the event that a company-sponsored student withdraws, the company is liable to pay any outstanding fees. Student who wishes to pursue the course after withdrawal shall be considered as a new applicant for the course.
- Student shall be informed of the outcome of the withdrawal application in writing. Approval of withdrawal is at the sole discretion of the institute.
- Upon approval of withdrawal, international students are required to cancel their student's passes as required by the Immigration and Checkpoints Authority.
- All outstanding fees have to be paid prior to withdrawal.

Signature of Student & Date

FOR OFFICIAL USE (*delete where applicable)

Reasons for withdrawal:

Name / Signature / Date

Comments by Student Admin

Comments by HOS

Name / Signature / Date

Name / Signature / Date

Agent:

Contract COL FPS

VAM

Class Report

STP cancellation (where applicable)