

PROGRAMME / MODULE DEFERRAL FORM

This form is to be completed by Full-time students who wish to defer their programme to the following academic year or by students who wish to defer particular module(s).

Surname:	First Name (s):		
Student Number:		Date of Birth:	/ / dd / mm /yr
Home telephone:			
			 , ,
Email address:	Last date of atte	endance at CIT:	/ / dd/mm/yr
Details of Course & Year whic	<u>ch you wish to defer</u>		
Course Code:		emic Year:	
	level (6-10) year (eg Y2)	(eg	2011/12)
			2011/12)
	Semester(s) Full Year 1 2 Module(s)		,

REASON/S FOR SEEKING A DEFERRAL (Please include information, which you consider relevant to your application. This information will help the Institute in reaching its final decision).

Signed:	Date:	
Recommendation of Head of Department:		
Signed:	Date:	

This form, fully completed must be returned to the Admissions Office on or before 31st October. Only in exceptional circumstances will an application for a deferral be considered after this date. Year 1 students must reapply for the following academic year through the CAO before 1st February.