

INTEGRATED INTERNATIONAL SCHOOL

(a) Capital Square Two, 21 Church Street #01-01, Singapore 049480

🕓 +65 6466 4475 🔞 admission@iis.edu.sg / info@iis.edu.sg 🃵 www.iis.edu.sg

Withdrawal Request Form

Name of student	
NRIC / FIN / Passport No.	
(strike out where not applicable)	
Date of birth	
Contact No.	
Course Name	
Date of commencement	
(Start date of the course for the academic year)	
l wish to request to withdraw from my cou on the school's website.	urse of study. I understand the school's withdrawal policy which is
Effective date of withdrawal*:	(if this is unfilled, the effective date of withdrawal
will be the date this form is received by the *This refers to the last day the student will pl	
Note: 1. Withdrawal means the student contract is	terminated and the student is no longer a student of this school.
	o regarded as a withdrawal from the course of study at this school.
Reason:	
SIGNED by the Student	SIGNED by the Student's parent or legal guardian (if the student is under eighteen (18) years of age)
Signature and date:	Signature and date:
	Name of Parent or Legal Guardian:
	NRIC / Passport No / FIN No:

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FOR OFFICE USE

Remarks by Counsellor / Education Consultant			
Name of Staff/Signature & date			
<u>Calculation of refund</u>			
l 			
Name of Staff/Signature & date Remarks by Principal			
Kernarks by Frincipal			
Signature of Principal & date			
Signature of Finicipal & date			
	Done by: (Name of staff)	Date:	
☐ Reply to student effecting the withdrawal			
☐ Issuance of refund, if any, to the student (if applicable)			
☐ Issuing of the attendance record (if applicable)			
☐ Cancellation of the student pass			
☐ Informing the FPS provider			
☐ Service standard met?	YES	NO	
The school sets a service standard of not more than 4 weeks from the point of receiving the withdrawal request to notifying the student of the outcome of his withdrawal request in writing are met.	5	5	

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