



STUDENT WITHDRAWAL FORM

Please submit this form to the Principal's Office. The Principal will forward the form to the appropriate departments.

STUDENT'S PARTICULARS

Student's Name _____ ISS Student ID No _____

Class/Homeroom Teacher _____ Grade _____

Personal Email _____ Withdrawal Date _____
[Graduates only] *[Exact date of last day in ISS]*

FORWARDING ADDRESS

Name _____ Email _____

Address _____

Tel _____

REASON FOR LEAVING *Tick and complete where appropriate.*

Repatriation Relocation to another non-home country

Transfer to another school in Singapore _____
[Name of school]

Graduation _____
[Name of next institution] [Country]

Other reasons _____
[Please specify]

REFUND INSTRUCTIONS (IF APPLICABLE) *Exact name of person to whom refund should be made payable.*

Name of Payee _____

Address _____

[For overseas address, a bank draft or telegraph transfer will be issued & all bank charges incurred will be borne by the payee.]

SUBMITTED BY *This form must be signed and dated.*

Student's Name _____ Tel _____ Signature _____ Date _____

Parent/Guardian's Name _____ Tel _____ Signature _____ Date _____

NOTE:

- [A] Students who leave at any point during the course duration must settle all remaining outstanding payments for the academic year.
- [B] Students who graduate or leave school must complete and submit:
 [i] the Student Withdrawal Form; and
 [ii] the School Clearance Form before or on the last day in school to their homeroom teacher.
- [C] Refund of fee (if applicable) will be in accordance with the refund policy stated in the student contract.

FOR OFFICIAL USE ONLY

1. Principal:

Signature Date

2. Admissions Department:

Signature Date

3. Head of School:

Signature Date

4. Finance Department:

Signature Date

Remarks:

