REQUEST FOR CERTIFICATION LETTER

INSTRUCTIONS:
• Submit this form with any supporting documentation in person to the GEM Office between 9.30am – 12.30pm.
• This form will be processed within 10 working days from the date of submission. Incomplete form submission will not be entertained.

SECTION 1:
Name: __________________________________ Matriculation No: ________________
NTU School: __________________________________________________________________
Mobile No: ________________ NTU Email: ________________________________________
Host University: ________________ AY/Semester Allocated: ________________
Signature: ______________________ Date: _________________________

REASON FOR REQUEST OF CERTIFICATION LETTER:
Please select one option below

☐ National Service Duty
  • Student requires official letter from OGEM for deferment purposes.
  • Attach the SAF 100 to this form. (The SAF 100 can be retrieved from the www. NS.sg website.)
  • Note that you cannot apply for deferment if you have been notified of the National Service Duty before applying for the GEM Discoverer programme.
  • The letter provided by OGEM will only state that you are participating in a particular programme. (It will not request for deferment from NS duties and is only meant to support a student’s request for deferment.)
  • Approval of deferment from NS duties will be subjected to MINDEFs approval and OGEM cannot further assist students if their deferment application is rejected.
☐ Visa / Immigration Issues

☐ Other reasons

Please specify:

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

MODE OF SUBMISSION:

Print the completed form and submit it with supporting document (if any) personally from Mondays to Fridays (except Public Holidays) between 930am and 1230pm to the following address.

GEM Discoverer
Office of Global Education & Mobility
Nanyang Technological University
42 Nanyang Avenue (Behind Student Services Centre, Level 2)
Singapore 639801

Forms submitted via mail and email will not be processed.
SECTION 2 (Official Use Only):

Team Head recommendation (Please choose one):

☐ Approve request
☐ Reject request

Name & Signature: __________________________ Date: _________________________

Received Date __________________________________________________________

Student notified (Date) ___________________________________________________