

APPLICATION FOR PHD STUDENT EXCHANGE PROGRAMMES WITH SMU

A) To be completed by Student

I would like to apply for the NTU-SMU PhD Exchange Programme.

Name : _____ Salutation : _____

Matriculation No.: _____ School : _____

Admission Date : _____ NTU Email : _____

(please use this email for all related correspondences)

My request to **apply** for the following SMU course(s) in AY _____ Semester _____

| In Order of Preference | Course Code | Course Description | SMU Course Units (CU) | Please Attach Course Overview |
|------------------------|-------------|--------------------|-----------------------|-------------------------------|
| 1 | | | | <input type="checkbox"/> Yes |
| 2 | | | | <input type="checkbox"/> Yes |
| 3 | | | | <input type="checkbox"/> Yes |

- ☐ I confirmed my eligibility as follows:
- full-time PhD student
 - CGPA ≥ 3.50
 - completed at least one (1) semester of study in NTU at the point of admission into the SMU course(s)
- ☐ I confirmed the course(s) applied in my application satisfied the following criteria:
- offered at the graduate-level
 - no duplication with NTU course(s)
 - standalone subject
 - can be completed within a semester
 - medium of instruction is English language, except where proficiency of another language is required
- ☐ I have enclosed the transcript of my academic records.
- ☐ I have enclosed the list of course(s) I am registered for in the current semester.
- ☐ I will ensure that there will be no clashes of class or examination with the SMU course(s) indicated in this application if I am also registering for NTU course(s) in the same semester.
- ☐ I understand that my application is subject to NTU's approval, SMU's approval and availability of course vacancies.
- ☐ I understand that the grades of the courses taken at the partner university (SMU) will not be included in my GPA computation.
- ☐ I understand that there will be no add/drop period for the registration of courses. I must decide on the courses before submitting this application form, and will not be allowed to withdraw from the exchange programme or courses once approval for enrolment has been granted.
- ☐ I acknowledge that credit transfer of the SMU course(s) taken is subject to my performance in the course(s), credit transfer criteria and NTU's approval. The equivalent credits transferred will be based on academic load. The general guideline is that 1CU is equivalent to 3AU.

Student's Signature & Date

B) To be completed by Student's Supervisor

| In Order of Student's Preference | Supervisor's Recommendation * | Remark (If any) |
|----------------------------------|--|-----------------|
| 1 | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 2 | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 3 | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Supervisor's Name_____
Supervisor's Signature & Date

*i. The approved credit can only be transferred when student meets the credit transfer criteria in NTU Credit Transfer and Course Exemption Policy.

ii. The equivalent credits transferred will be based on academic load. The general guideline is that 1CU is equivalent to 3AU.

C) To be completed by School's Chair or designate

| In Order of Student's Preference | Approval for Course Registration | No. of AU for Credit Transfer * | Remark (If any) |
|----------------------------------|--|---------------------------------|-----------------|
| 1 | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 2 | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 3 | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

Chair's Name_____
Chair's Signature & Date

*i. The approved credit can only be transferred when student meets the credit transfer criteria in NTU Credit Transfer and Course Exemption Policy.

ii. The equivalent credits transferred will be based on academic load. The general guideline is that 1CU is equivalent to 3AU.

D) To be completed by School's Admin Staff☐ Outcome conveyed to Student on _____.☐ Completed form sent to Graduate College on _____.

Remark (if any): _____

Admin Staff's Name_____
Admin Staff's Signature & Date