

Request For Course Withdrawal or Cancellation Form

To be filled out by the Student and submitted to the Administration Department Please Note: This request will may follow up by an interview and you must allow 10 working days to be processed.

| Student Name | | | |
|--|--|---|-------------------------|
| Student ID | | | |
| Address | | | |
| Suburb | | State & Postcode | |
| Email | | Tel / Mobile | |
| Course | | Course Start Date: | |
| Date of Withdraw | al/Cancellation effective from | | |
| Transfer to other in | nstitution | Yes No | |
| Evidence to suppo | ort your application: (Supporting docume | ents MUST be attached) | |
| Visa copy/Lette | r from Department of Immigration and B | order Protection (DIBP) | |
| Air ticket and c | onfirmation from DIBP for voluntary stud | ent visa cancellation request | |
| Letter of offer o | or Confirmation of Enrolment (CoE) | | |
| Others, please | specify: | | |
| | | | |
| Course Withdraw | al / Cancellation Policy: Important Inform | ation | |
| You must submiYou must be upYour request wilIf your request isYou are aware th | al / Cancellation Policy: Important Inform it notice of your intention and the request to date with course fees at the time of the I be assessed following the refund policy is successful, you may require to pay an add that this application will be assessed accordat the time of my enrolment. | for a refund in writing. e request. n the term and conditions of enrol ministration fee. | |
| I am discontinuing | cept the policy and declare that the inforn my studies and will be liable for the tuition mitted after the term has commenced. An | on fees for the term when the appl | ication for withdrawal/ |
| Student Signature | | Date: | |



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| Office Use Only (tick or circle) | | | | |
|---|------------------|---|----|----------------|
| T T | | yment details | | |
| Received after due date | Amount | | | |
| Unpaid tuition fees for the current study period (term) | Date paid | | | |
| Paid the tuition fees for the current study period (term) | Payment end date | | | |
| Verified by: Da | | rate: | | |
| | | | | |
| Intervention Officer | | | | |
| Student has completed the minimum of six months of the principal course of study: | | Yes | No | |
| Overall attendance rate (%) | | | | |
| Academic Course Progress | | Satisfactor | У | Unsatisfactory |
| Internal Appeal is requested | | Yes | No | |
| If yes, the student must see PEO for interview | | | | |
| Chief Executive Officer (CEO) (if applicable) | | | | |
| Complaint form attached | Yes | No | | |
| Notes | • | | | |
| External Appeal is requested: | | Yes | No | |
| | | | | |
| Chief Executive Officer / Admissions Officer | | | | |
| Approve Application | | Letter of Release | | |
| Reject Application | | Letter of explaining refusal of release | | |
| Authorized Signature | | Date | | |
| | | | | |
| | | | | |
| Comments | | | | |