

APPLICATION FOR WITHDRAWAL

STUDENT DETAILS

Given name: _____ Family name: _____

Student ID: _____ Date of birth: ___/___/___

Local current address: _____

Suburb: _____ State: QLD Post code: _____

Email address: _____ Phone number: _____

ELIGIBILITY POLICY FOR WITHDRAWAL

Student has completed 6 months of the principal course: YES NO

(NB: Any student who has/have NOT completed the 6mths of the principal are not eligible for transfer, principle course is your last or the higher course of enrolment).

Please state which Course/s/Qualification/s start/finish dates this claim is for:

REASON FOR WITHDRAWAL AND APPLICATION FOR REFUND

- Family problems Transferring to another RTO (college) Offer letter must be provided
 Cancelling enrolment Others: _____

Please elaborate on your circumstances.

If you are leaving, when do you intend on leaving Australia? _____

Student signature: _____ Date: ___/___/___

Office Use Only

Evidence Given: Yes No Type of documents: _____

Refund approved Refund not approved Refund not required

Administration Officer: _____ Date: ___/___/___

Amount refunded: \$ _____ AUD Date refunded: _____

Comments:
