



Application for Deferment, Cancellation or Withdrawal

| Personal details | | | | | |
|--|------------------------------|-----------------------------|--------------------------|--|-------|
| Family Name: | | Student #: | | | |
| Given Name: | | Phone: | | | |
| Email: | | DOB: | | | |
| Course code: | | Course title: | | | |
| Please select for not continuing with course | | | | | |
| <input type="checkbox"/> Deferment | | | Proposed date from: | | To: |
| <input type="checkbox"/> Withdrawal | | | Proposed date effective: | | |
| <input type="checkbox"/> Cancellation of COE | | | Proposed date effective: | | |
| Reasons for not continuing (attach relevant documents) | | | | | |
| | | | | | |
| Student sign: | | | Date: | | |
| Authorisation (Office use only) | | | | | |
| Withdrawal/Deferment fee: | \$300.00 | Cancellation of COE: | \$250.00 | | |
| PAID: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: | | |
| Sent to Manager: | <input type="checkbox"/> Yes | Name: | | | Date: |
| Pre-Approved: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Sign: | | |
| Reasons: | | | | | |
| Sent to CEO: | <input type="checkbox"/> Yes | Name: | | | Date: |
| Approved: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Sign: | | |
| Reasons: | | | | | |
| Letter supplied to student | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Date: | | |