# Enrolment Cancellation, Withdrawal or Deferment Form

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Details** | | | | | | | | |
| Student Name | |  | | | | | | |
| Mobile | |  | | Home phone | | |  | |
| Email | |  | | | | | | |
| Course code and name | |  | | Commencement date | | | / / | |
| **Withdrawal** | | | | | | | | |
| **I wish to withdraw from my course** | | | | | | | | |
| **Withdrawal date** | | / / | | | | | | |
| **Withdrawal reason** | |  | | | | | | |
| **Signature** | |  | | **Date** | | / / | | |
| **Deferment** | | | | | | | | |
| **I wish to defer my enrolment for  3 months**  **6 months** | | | | | | | | |
| **Deferment date** | | From / / To  / / | | | | | | |
| **Deferment reason** | |  | | | | | | |
| **Signature** | |  | | **Date** | | / / | | |
| **Cancellation** | | | | | | | | |
| **I wish to cancel my enrolment prior to commencing** | | | | | | | | |
| **Cancellation date** | | / / | | | | | | |
| **Cancellation reason** | |  | | | | | | |
| **Signature** | |  | | | **Date** | | | / / |
| **Office Use Only** | | | | | | | | |
| Date received | / / | | | | | | | |
| Approved | | | Denied | | | | | |
| Date of decision | / / | | Student notified of decision | | | | | |
| Signature of approver |  | | | | | | | |
| Refund amount if applicable |  | | | | | | | |
| If application is denied, state the reason/s for the decision: | | | | | | | | |
|  | | | | | | | | |