# Enrolment Cancellation, Withdrawal or Deferment Form

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| **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: |
|  |