



Application form for Deferral/Suspension of Study/Cancellation of Enrolment

Personal Details	
Family Name:	
Given Names:	
Student ID:	Date of Birth: (dd/mm/yy): ____/____/____
Home phone:	Email Address:
Deferral/Suspension/Cancellation of Study (NOTE: an appointment with the International Student Support Office must be made first)	
<p>I wish to apply to [Please tick <input checked="" type="checkbox"/> one of the following]</p> <p><input type="checkbox"/> DEFER my enrolment - applies only before the enrolment has started. The request for deferral is to delay the start date of a completed enrolment. Where Melbourne College of Business and Technology defers the course start dates this action is subject to refund conditions.</p> <p><input type="checkbox"/> SUSPEND my enrolment- applies during course studies and is temporary. A request for suspension can only be granted under compelling and compassionate circumstances. Melbourne College of Business and Technology can impose suspension in the case of misbehaviour by the student.</p> <p><input type="checkbox"/> CANCEL my enrolment- applies when a course has commenced. A request is either for withdrawing from a course or requesting a transfer of provider. Melbourne College of Business and Technology can cancel a student's enrolment in the case of misbehaviour by a student or in the case of a breach of student visa conditions.</p>	
Reason for Deferral or Suspension of Studies (please tick): <input type="checkbox"/> Delay in receiving student visa <input type="checkbox"/> Medical <input type="checkbox"/> Personal reasons <input type="checkbox"/> Others	
DEFERRAL / SUSPENSION (Please circle) Start Date: _____ End Date: _____	
Are you going to be Onshore or Offshore during this period? <input type="checkbox"/> Onshore <input type="checkbox"/> Offshore	
I am aware of the circumstances for deferral, suspension, or cancellation of my enrolment and the following is a summary of the reasons to support my application (Please attach relevant supporting documentation for your application.)	
In signing this application, I acknowledge: <ul style="list-style-type: none"> I am aware that the decision to grant my deferral, suspension, or cancellation of enrolment may affect my Student Visa. I am aware that Administration Fees may apply once my application of leave is approved. I am aware of implications to my study load on return and customisation to my study schedule undertaken to ensure completion of the qualification with the CoE. I am aware that this application will take at least 14 business days to finalise. 	
Student Signature:	Date: / / (dd/mm/yy)



This section is for office use only

Application to Defer, Suspend or Cancel Enrolment received by:		Date: ___/___/___	
Relevant supporting document(s) attached? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Has the student been counselled concerning the implications to their study load on return and customisation to their study schedule undertaken to ensure completion of the qualification 'practically' within the dates of the new CoE? <input type="checkbox"/> YES <input type="checkbox"/> No			
FEE Clearance	All Dues paid <input type="checkbox"/> Yes <input type="checkbox"/> No, (pending amount \$.....)		
Finance Officer Sign:		Date:	
Is the Application approved by the Academic Officer /RTO Manager? <input type="checkbox"/> Academic Officer <input type="checkbox"/> RTO Manager <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NR			
Academic Officer	<input type="checkbox"/> Academic file has all the assessments <input type="checkbox"/> All results accurately recorded in the WISENET <input type="checkbox"/> Credit Transfer Units recorded on WISENET & file <input type="checkbox"/> WISENET updated <input type="checkbox"/> New Timetable required and created		
Student Last study Date	(dd/mm/yy): ___/___/___		
Academic Officer Signature:		Date:	
Comments:			
Academic Officer or RTO Manager Signature:		Date	
Updated on the PRISMS	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NR
Student Notified	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NR
Admin Officer (All the variation documents has been filled)	<input type="checkbox"/> Yes	<input type="checkbox"/> NO	<input type="checkbox"/> NR
Admin Officer Signature:		Date:	