

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

Personal Details							
Family Name:		Given	Given Name:				
Course Name:		Last a	attended cla	ass date			
Student ID:		Date of	Birth: (dd/	mm/yy)	:/	'/_	
Home phone:		Email A	ddress:				
Deferral/Suspension/Cancellation of Study (NOTE: an appointment with the International Student Support Office must be made first)							
I wish to apply to [Please tick 🗵 one of the following]							
DEFER my enrolment -	applies only before t	he enroln	nent has sta	rted. Th	e reque	est for	
	deferral is to delay the start date of a completed enrolment.						
	Where Melbourne C			-			
	the course start dates this action is subject to refund conditions.						
SUSPEND my enrolment-	applies during course studies and is temporary. A request for						
_ ,	suspension can only		•	•	•		
	compassionate circu	-		-			
	Business and Techno			_			
	case of misbehaviou						
CANCEL my enrolment-	applies when a cours	e has con	nmenced. A	request	is eithe	er for	
·	withdrawing from a o			-			
	Melbourne College o						
	student's enrolment in the case of misbehaviour by a student						
	or in the case of a bro	each of st	tudent visa	conditio	ns.		
Reason for Deferral or Suspension of Studies (please tick):							
Delay in receiving student visa	Medical Person	al reason	s Oth	ers			
DEFERRAL / SUSPENSION (Please circle) Start Date: End Date:							
Are you going to be Onshore or Offshore during this period?							
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 significantly application to the last							
 In signing this application, I acknowledge: 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			inalico				
I am aware that this application will ta Student Signature:	ike at least 14 DUSINESS	uays to T		1	/	(dd/mm/yy)	
Student Signature:			Date:	/	/	(uu/IIIII/yy)	



This section is for office use only

Application to Defer, Suspend or Cancel Enrolment received by: Date:/					
Relevant supporting document(s) attached?					
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 'practicably' within the dates of the new CoE?					
☐ YES ☐ No					
FEE Clearance	All Dues paid Yes No, (pending amount \$)				
Finance Officer Sign:	Date:				
Is the Application approved by the Academic Officer /RTO Manager? Academic Officer RTO Manager					
☐ Yes ☐ No	□ NR				
Academic Officer	Academic file has all the assessments				
	All results accurately recorded in the WISENET				
Credit Transfer Units recorded on WISENET & file					
	WISENET updated				
Charles at Land at a day Date	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	☐ Yes ☐ No ☐ NR				
Student Notified	☐ YES ☐ NO ☐ NR				
Admin Officer (All the variation documents has been filled) Yes NO NR					
Admin Officer Signature:	Date:				