# VET & ELICOS Deferment, Suspension or Cancellation Form



Version 1.0

### Important Information – PLEASE NOTE:

- This form is to be submitted to the Shafston International College for approval.
- Please read the Deferral Suspension and Cancellation of Studies Policy and Procedure available on Shafston's website before completing this form (www.shafston.edu)
- Students will be notified via email of the outcome within 10 working days from the date of receipt of complete application.
- Before your application will be considered, you must complete all the sections below and attached the documents, relevant to your application.

Students must complete and submit the application to **<u>students@shafston.edu</u>** for approval.

Student's Personal Details				
Date of Application			Student ID No.	
Full Name			Mobile No.	
Email Address			Date of Birth	
Address				
Campus	Brisbane	Gold Coast		
Course	VET			
Course Name	*			

#### Are you leaving Australia?

If YES, please attach a copy of your travel itinerary to this application and complete the overseas contact details below as per DHA requirements:

Street	
Suburb/District/State	
Country	Postcode
Oversea Contact No.	

Applying for		
Deferment	Suspension	Cancellation

Reason for Leave (please select the appropriate reason)			
Financial Hardship	Illness	Family Bereavement	
Family Obligations	Unable to cope with the course		

Yes

No

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Other (specify):			
Supporting Documents attached	YES	NO	
Please DO NOT Submit this form unless all supporting documer   Personal statement explaining the reason why you are ap   Supporting documentary evidence of compassionate or   Parent/legal guardian signed permission letter (if under 18   Copy of Parent/legal guardian passport displaying signate   Administration fee payment receipt   Other:	pplying to defer you compelling circum 3)	ur enrolment	

Start Date End Date	Suspension	Dates		
	Start Date		End Date	

#### Student Declaration

- I declare that the information provided above is true and complete.
- I authorise Shafston International College to obtain official student records from any educational institution necessary to make an informed decision about the application or matters that concern enrolment.
- I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application may delay the process of my application.
- I understand that deferring, suspending my enrolment will affect my course completion date and may also affect my current student visa.

**Student Signature:** 

**Signed Date:** 

Guardian Signature (if student is under 18):

Office Use Only				
Outcome:	From Date:	to		
Approved By	Signature:			
Approved Date				
Comments (if applicable):				
Details recorded in aXcelerate				