

U 102, Level 1, 30 Cowper Street, Parramatta, NSW 2150 RTO: 45182 | CRICOS: 03687F | ABN: 18 609 896 755

Phone: (02) 8005 0010 Email: info@acchs.edu.au

APPLICATION FOR DEFERMENT, SUSPENSION/ LEAVE, CANCELLATION OF STUDIES

| Student ID |
|---|
| Student FULL Name: |
| Current Course & Course Code: |
| Date of Commencement of Study: |
| APPLICATION FOR: DEFERMENT SUSPENSION/LEAVE CANCELLATION OF ENROLMENT |
| FULL DETAILS OF YOUR COMPASSIONATE / COMPELLING REASON/S WITH EVIDENCE MUST BE ATTACHED. Students are to receive a copy of the <i>Deferring, Suspending or Cancelling Students Enrolment Policy and Procedure</i> and <i>Complaints and Appeals Policy and Procedure</i> with this application. |
| A decision must be provided to the student within 10 working days from the date of receipt of a completed, signed and dated application form with required evidence. |
| Suspensions of study will not be granted for more than a 1 month period. Students who defer or suspend their studies for more than 28 days must return home unless there are exceptional circumstances which prevent them from travel such as a medical condition. |
| Students should seek advice from the Department of Home Affairs (DHA) regarding any change to their enrolment status and possible implications to their student visa. |
| REASON FOR REQUEST: (ATTACH ADDITIONAL PAGES AS NEEDED) |
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| RELEVANT DATES |
| From: To: |
| STUDENT DECLARATION |
| I have been provided with a copy of the <i>Deferment, Suspension and Cancellation &Complaints and Appeals</i> |
| Policies and Procedures with this application form |
| I understand I need to contact DHA in regard to the status of my student visa as I may be at risk of my visa being cancelled. |
| Student name: |
| Student Signature: Date: |
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| OUTCOME: Approved Not Approved |
| Reason declined: |
| Staff Name/Position/Signature & Date: |