Deferment, Suspension or Cancellation of Enrolment Form

PERSONAL INFORMATION

1. Enter your full name

Family Name (Surname)

Given Name

2. Enter your birth date

Day/month/year

3. Gender

Male ☐ Female ☐ Other ☐

4. Student ID:

5. Course/s Enrolled:

6. Enter your contact details

Home phone

Work phone

Mobile

Email

7. Passport Number

8. Current address

Suburb, locality or town

State/territory Postcode

Country

REQUEST DETAILS

Please select ONE of the following options

TICK ONE OPTION BELOW		Date from *(DD/MM/YEAR)*	Date to *(DD/MM/YEAR)*
☐	Deferral of Course (Prior to course commencement)	_____/ _____/ _____	_____/ _____/ _____
☐	Suspension of Course (During the current enrolment)	_____/ _____/ _____	
☐	Cancellation of Course (Terminate the enrolment permanently)	_____/ _____/ _____	NA

REASON FOR REQUEST

Please select ONE of the following options

TICK ONE OPTION BELOW	REASON FOR REQUEST	PLEASE PROVIDE EVIDENCE
☐	Serious illness or injury, where a medical certificate states that you are unable to attend classes	Medical certificate/ hospitalisation records
☐	Bereavement of close family members such as parents or grandparents	Death certificate, if possible or other evidence, such as hospitalisation records/ police records
☐	Delay in issue of a student visa	
☐	Compassionate and compelling circumstances	
☐	Other reason/s. Please give details below	

TRAVEL DETAILS

Are you leaving Australia during the above period?

☐ No ☐ Yes, please attach a copy of your travel itinerary and flight details

VISA INFORMATION

If you wish to defer or suspend your course due to compassionate or compelling circumstances, you must complete this Deferment, Suspension or Cancellation of Enrolment Application Form and submit the form to Aventia Institute prior to the required date for deferment, suspension or cancellation.

This written application must include supporting documentary evidence to be assessed and approved by Aventia Institute.

Please note that **t**he process of deferring, suspending or cancelling an enrolment may affect your student visa. If you have any enquiries, you should visit the Department of Home Affairs (DHA website **https://immi.homeaffairs.gov.au/**or call the **DHS helpline on 131 881** or contact your **local DHA office** for advice to prevent an unsatisfactory visa outcome.

If you return prior to the deferment or suspension stated date or expected date, you must notify Aventia Institute as soon as possible.

PLEASE READ AND SIGN BELOW

By signing below, I confirm that:

1. I have provided accurate and complete information
2. I acknowledge and understand that the provision of incorrect information may lead to a cancellation of my enrolment and student visa

Signed: _____ Date: _____
Student

Print Name _____

Signed: _____ Date: _____
(Parent / Guardian, if student is under 18)

Print Name _____

FOR OFFICE USE ONLY

Application Assessment

Application approved? ☐ yes ☐ No, give reasons:

_____

Signed: _____ Date:
CEO / Authorised Officer

_____

Print Name

_____

Administration

Student notified of outcome? ☐ Yes Date notified: _____

PRISMS updated? ☐ Yes Date updated: _____

Signed: _____ Date: _____

Print Name

_____