

WITHDRAWAL FROM COURSE AND CHANGE OF COURSE REQUEST FORM

This form is for students who wish to apply for a withdrawal or change from the course. Please ensure that you have read and understood the withdrawal from the course and enrolment policy. Please refer to ihBC.edu.au for more information.

Students must submit all supporting documents required by this application.

Please ensure that all fields are thoroughly filled and submit the form to Student Services at enquiries@ihbc.edu.au

CHANGE OF COURSE

WITHDRAW

STUDENT DETAILS

First Name : _____ Student ID : _____
 Last Name : _____ Current Course : _____
 Phone No. : _____ Starting Date : _____ USI No : _____
 Address : in Australia _____ Postcode : _____

WITHDRAW

Last date of study: DD / MM / YY please write N/A if you haven't started your studies at ihBC

Withdrawal reasons:

- Health issues - provide all medical certificates and letter from your health specialists
- Leaving Australia - provide all flight tickets and a letter indicating the reasons for leaving Australia
- Course not up to expectations - provide a comprehensive letter indicating why the course was not up to your expectations
- Change of course (change of ihBC course)
 - » Name of current course : _____
 - » Name of new course : _____

Are you requesting release? YES NO

Have you provided evidence of reasons for your intention to withdraw? YES NO

SUPPORTING DOCUMENTS

Evidence provided:

- Medical certificate
- Flight tickets
- Letter indicating reasons for withdrawal
- Other relevant documents (e.g. funeral or marriage notice, news article if political unrest); _____

DECLARATION

- I declare to the best of my knowledge that the information supplied on this form is true and accurate.
- I have read and understand the defer, suspend or cancel policy.
- I have attached to this document all documents to support my application.
- I have read and understand the refund policy.
- I understand that a counselling session may be organised following my withdrawal application.
- I have sought advice from Department of Home Affairs of the impact a withdrawal has on my visa YES NO

Student Signature: _____ Date: _____

Change of Course approved by Director: _____ Signature: _____ Date: _____