Received By:

Date:



REQUEST FOR WITHDRAWAL/RELEASE/DEFERRAL

This form is to be completed by students who wish to apply for Withdrawal, Release or Deferral from their course at TAFE SA. If a refund is required a Request for Refund of International Student Tuition Fees form will need to be completed as well.

Once completed, please return the form, together with your supporting documents, to the International Unit. Supporting documents may include Visa Refusal Letter from the Department of Home Affairs, a Letter of Offer from the new education provider, medical documents. If seeking to exit early with a lower qualification, please complete the Request for Change of Course / Exit with a lower qualification form instead of this form.

Section A: Personal details

Full name:					
TAFE SA ID Number:	Date of Birth:				
Address:					
Address.	Suburb:		5	State:	Postcode:
Email:					
Telephone:	Home:	Мо	bile:		
Course Name:					
Course Start Date:					
Last Date Attended Class:					

If your course is packaged with another TAFE SA or university course list those courses

Principal course start date (the highest level course in the package):

I am applying for:

Release – A release is required when a student intends to transfer to another education provider and the student is making the request whilst within the Restricted Transfer Period. If the Restricted Transfer Period has finished, tick Withdrawal.

Under the National Code, Standard 7, the Restricted Transfer Period finishes after the first 6 months of your principal (final) course. I confirm I have read the TAFE SA website and understand the circumstances in which a Release may be granted or refused: <u>http://www.tafesa.edu.au/international/apply-international-student/int-policies-responsibilities/int-transfer-provider</u>

U Withdrawal

Withdrawal due to change in visa subclass

Deferral

Deferring Nursing students: if your original English language test is older than 12 months old when you return to study you will need to produce another test result to be re-admitted (as per the NMBA requirements).

REASON FOR WITHDRAWAL/ **RELEASE**/ **DEFERRAL** (*Please attach any supporting documents – all Releases must have a Letter of Offer from the new Education Provider*)

OFFICIAL

I understand that, if seeking a deferral, the fees, course structure, location, delivery and offering of my my return.

I am a Nursing student and I note the requirement about my English language test indicated above.

Student Signature:	Date:
If U'18 I, as the parent/guardian of the above named student sup and approve this transfer request Parent/gu	port Jardian name:
Signature:	Date:

Section B: Program Area Use Only – Deferral of student

PROGRAM AREAS COMMENTS / RECOMMENDATIONS

Recommended Return Date after Deferral:				
When student returns, will they still have a full-time enrolment? Yes			No	
If no, outline the situation below:				
Lecturer Name:	Signature:			

Section C: International Unit Use Only

INTERNATIONAL UNIT COMMENTS / RECOMMENDATIONS

Date :

Julie Ladic, International Student Support Consultant

Office Use Only:

Position:

Processed by:	Date processed:
□Release actioned in PRISMS (if required)	□COE amended/ cancelled
□SIS Updated	□File to Studylink
□Program Area notified (if after semester	□ Refund form required
commencement)	

my course may change upon



Date: