

Deferment, Suspension or Cancellation of Studies Form

Important instructions

- The form is submitted to the Administration Department for approval.
- It will be notified to you within 10 working days from the date of receipt of complete application
- You should read the policy carefully to establish your eligibility for this form
- If you change your address during the period of suspension/deferment/cancellation please contact us to ensure your address details are updated for future correspondence
- Before your application will be considered, you must complete all the sections below and attached the documents, relevant to your application

STUDENT DETAILS

Last Name:			
Given Name:			
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of Birth:
Address:			
Postcode:		Mobile No.:	
USI:		Group:	
Email:			
Course:	<input type="checkbox"/> 22253VIC Certificate III in EAL (Access) <input type="checkbox"/> 22258VIC Certificate IV in EAL (Further Study) <input type="checkbox"/> BSB51915 Diploma of Leadership and Management <input type="checkbox"/> BSB61015 Advanced Diploma of Leadership and Management		
Applying for:	<input type="checkbox"/> Deferment <input type="checkbox"/> Suspension <input type="checkbox"/> Cancellation		
Please tick the appropriate reason:			
<input type="checkbox"/> Financial Problem <input type="checkbox"/> Unable to cope with the course taught <input type="checkbox"/> Illness <input type="checkbox"/> Personal Matters <input type="checkbox"/> Family Obligations <input type="checkbox"/> Family Bereavement <input type="checkbox"/> Others (Specify): _____			
Please specify the time period: From Date: _____ to _____			

Please provide detailed description of any compelling and compassionate reasons that is/are affecting you. Please provide evidences to support you claims and attach them with this application.

Are you leaving Australia? Yes No

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

Overseas Contact Details:

Unit/House:			
Street:			
Suburb/District			
State:		Country:	
Overseas Contact No:			

Student Declaration:

- I declare that the information provided above is true and complete.
- I authorize The Kensington Institute of Australia 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 or withdrawal of the offer of a place.
- I declare that I would accept the after suspension timetable given to me by The Kensington Institute of Australia to complete my remaining/missed studies.

Signature:		Date:	
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FOR OFFICE USE ONLY

Outcome:	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		
Please specify the time period: From Date: _____ to _____			
Comments (Attach Separate sheet, if needed): (if applicable)			
Approved by:			
Signature:		Date:	
Processed by:			
Student Signature:		Date:	