Course Cancellation/Deferment/ Temporary Suspension/Transfer Form

Date: ______________________

Student Number: ______________________

Email Address: ______________________

Family Name: ______________________

Other Names: ______________________

I wish to apply for (please tick one box): # $50 Administration Fee Applies.

☐ Course Cancellation (This is if you want to finish your course early) # **Complete Section A**

☐ Course Deferment (This is if you want to change the start date of your course) # **Complete Section B**

☐ Temporary Suspension (This is if you need to go home for health/family reasons) **Complete Section B**

☐ Transfer (This is if you want to go to another college) ** Complete Section B**

Section A

If you are applying for a refund before course commencement then Abilities “Tuition Fee Refund Policy” applies (see student handbook or your enrolment form). Please note if you wish to apply for a refund after your course has commenced as per our terms and conditions no refund will be granted. In special cases such as a death in the family or extreme medical conditions where a student needs to return home a percentage of tuition may be refunded. If you are applying for a refund after course commencement then you will need to attach (1) Medical certificate (2) Copy of air ticket (3) Complete the section below:

Reasons for canceling course (and why you want a refund if applicable):
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

What date do you want to finish your studies (must be a Friday)?_______________________

Section B

Reason for Deferment / Temporary Suspension / Transfer. (You must attach evidence such as medical certificates or a letter of offer if transferring to support your application):
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

If deferring – what date would you like to start your course?____________________

If requesting a temporary suspension – what period would you like to suspend your studies?

Start date (must be a Monday): __________ Date you wish to return (must be a Monday): __________

**Please note canceling, deferring or temporarily suspending your enrolment may affect your student visa**

Student Signature:_____________________ Date:____________________

Entered in Ebicas by:

(1) Student Services Date: Name:
(2) Admissions Date: Name:
(3) Marketing Date: Name: