

** Do you require a release letter No

Yes (If yes, please submit a separate statement outlining your reasons for seeking to change providers together with any relevant supporting documentation)

* If onshore, will you be leaving Australia during the above period? No Yes (please attach a copy of your confirmed travel itinerary and flight details).

** You must resume your course within 6 months.

REASON FOR REQUEST

Please select ONE of the following options

Document Name: Deferment, Suspension or Cancellation of Enrolment Form	RTO Code: 45821	CRICOS Code: 03997C
Version: 1.3	Approved: 15 June 2023	ABN : 44644500774
Westin College	16-18 Aberdeen Street ,Perth WA 6000	info@westincollege.com.au
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		www.westincollege.com.au

VISA INFORMATION

Should 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 Westin College prior to the required date of deferment, suspension or cancellation.

This written application must be accompanied by sufficient documentary evidence in support of your request, to be assessed and approved by Westin College.

Please note that the process of deferring, suspending or cancelling your enrolment may affect your student visa. You are therefore advised to contact the Department of Home Affairs (DHA) should you have any enquiries. DHA contact information is available on the DHA website (www.border.gov.au).

Should you return prior to the expected end date of your deferment or suspension, you must notify Westin College as soon as possible.

PLEASE READ AND SIGN BELOW

By signing below, I confirm that:

- I have provided accurate and complete information.
- I acknowledge and understand that the provision of incorrect information may lead to cancellation of my enrolment and student visa.
- I do not have any outstanding fees.

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. _____

Release approved (if applicable) Yes, No give reasons. _____

Signed _____ Date _____
PEO / Authorised Officer

Print Name _____

Administration

Student notified of application outcome (including Release, if applicable) Yes Date notified _____

PRISMS updated? Yes Date updated _____

Signed _____ Date _____
Authorised Officer

Print Name _____

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