

DEFERRAL/SUSPENSION APPLICATION FORM

Name:		Student ID:	
Address:			
Phone:			
Email:		DOB:	

Request for deferral or suspension will only be approved under compassionate or compelling circumstances. This is at the discretion of the Director and the International Manager. Please provide supporting documents with your application, such as medical certificates. Please note, deferral confirmation is not conditional, until you have received and approval letter from the college. Students who take leave without this approval letter being issued will be marked as absent and may risk being reported for breaching visa conditions.

Reason for deferral:	
DOCUMENTS ATTACHED	
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Student signature		Date	
Guardian signature (if student is under 18 years of age)		Date	
Guardian Name			

COLLEGE OFFICE USE ONLY - (this section)

Received by:		Date:	
Admin Signature:			
Approved	<input type="checkbox"/> YES <input type="checkbox"/> NO		
If not Approved, reason:			
Approved by:		Date:	
Signature:			
PRISMS updated	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Changes completed on aXcelerate	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Supporting Documentation uploaded on students Portfolio in aXcelerate	<input type="checkbox"/> YES <input type="checkbox"/> NO		