

## COURSE DEFERRAL FORM

This form can be used by either domestic or International students who wish to cease their studies for more than three weeks during the course semester.

Domestic students who have Smart and Skilled funding have a maximum deferral time of 12 months from the date deferral is approved and the College will inform you in writing of the fee implications.

International students seeking deferral shall need to seek advice regarding the effect of deferral on their student visa from the Department of Home Affairs (DHA). Please refer to [www.homeaffairs.gov.au/](http://www.homeaffairs.gov.au/) for information on student visa conditions.

### SECTION A: PERSONAL DETAILS

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	Family Name: (as in passport)
Given Name: (as in passport)	Student ID:
<input type="checkbox"/> Domestic	<input type="checkbox"/> International

### SECTION B: COURSE CURRENTLY ENROLLED IN:

Course Name:	Course Code:
Course Duration:	Start Date:
Industry Placement Hours:	VET Student Loans: <input type="checkbox"/> Yes <input type="checkbox"/> No  SMART & SKILLED: <input type="checkbox"/> Yes <input type="checkbox"/> No

### SECTION C: DEFERRAL REASONS

Explain in your own words the reason for your deferring:

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### SECTION D: STUDENT'S DECLARATION

I hereby officially **DEFER** from the Course I am undertaking at Kenvale College for the following after Semester \_\_\_\_\_ of the academic year \_\_\_\_\_.

I intend to come back and continue the Course in the following Semester \_\_\_\_\_ of the academic year \_\_\_\_\_.

I understand that I would need to officially enrol again and failure to do so may result in my withdrawal from the course.

I also understand that as an International Student I need to check my visa entitlements and conditions; and I will need to apply for a new student visa to be able to complete my course duration stated on my CoE.

Student Name:	Student Signature:
	Date:

**SECTION E: Office Use only**

<b>Academic Department</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
	Comments:	
	Signature:	Date:
<b>Compliance Department</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
	Comments:	
	Signature:	Date:
<b>Documentation Reviewed</b>	Deferral of CoE: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	N/A
	Payment of Outstanding Fees: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	N/A
	Airline Ticket: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	N/A
	Medical Certificate: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	N/A
	Death Certificate: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	N/A
	Other Evidences (please specify):	