

Current Home/Residential Address:

Building/Property Name:

Flat/Unit No.

Street/Lot No.

Street Name:

Suburb/Town:

State/Territory:

Postcode:

Unique Student Identification (USI) Number:

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N.B If we do not have your USI we can not issue an AQF certificate

What is the reason / circumstance for cancellation/withdrawal application

Wanting to change course and train with another provider. Name of other training provider & RTO ID Number; (if wanting to train with another provider applicant **MUST** provide Letter of Offer from other provider)

Family/Personal/Financial Reasons

Refused student visa

Nonpayment of tuition fees

Medical Reason/s

misbehaviour by the student

breach of course progress or attendance Requirements

Course cancelled or rescheduled by MCOHB (provider default)

Other compassionate and compelling circumstances Please specify):

Student declaration:

- I have read and fully understand MCOHB Deferral, Suspension, Cancellation Policy.
- I understand that completing this form does not guarantee cancellation/withdrawal from studies when application has been requested by me.
- I understand that I have a right to appeal through MCOHB's internal complaints and appeals process, in accordance with Standard 10 (Complaints and appeals) of the National Code of Practice for Providers of Education and Training to Overseas Students 2018, within 20 working days of this application not being approved.

For international students: If approved MCOHB will report your cancellation/withdrawal to Department of Home Affairs which may affect the status of your visa. If you require more information as to how this action may affect your visa status, contact the Department of Home Affairs.

Student signature:

Date of application:

Office use: N.B Applications MUST be approved by the Director of Studies or their delegate before education agent is notified and submission to the finance dept. for refund calculation if applicable.

Required evidence attached YES NO

Examples of required evidence: Notice from Home Affairs refusing visa application, airline tickets departure & return if student is required to return home, medical certificate, finance notice of nonpayment of tuition fees, other provider Letter of Offer.

Approved: YES NO

If not approved why?

Director of Studies/delegate signature: Date:

Printed Name:

Date request received: Received by: **(MCOHB staff name)**

MCOHB staff member position:

Student file updated: YES NO Date updated:

MCOHB staff member who updated student file:

Staff member name:

SMS updated YES NO Date updated:

Admin officer Name:

PRISMS updated YES NO Date updated:

Admin officer Name:

Students' education agent notified: YES NO

If Yes: Date notified: Method education agent notified:

Letter email phone