

PO Box 2286 Strawberry Hills NSW 2012 CRICOS Provider Code: 03662D ABN: 19 892 732 021

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WITHDRAWAL FROM COURSE OF STUDY

If you are thinking of withdrawing from your course, take a moment to discuss your concerns with the Director of Teaching and Learning, your Course/Subject Leader, Head of Discipline or lecturer, or the Student Centre. In circumstances where you are unable to complete the withdrawal process, you may be withdrawn from your course by the School, following consultation with you and with the approval of the Director of Teaching and Learning.

If you withdraw from your course after your census date, you are unable to obtain a refund or re-credit of your full fee for the semester unless there are exceptional circumstances.

If you withdraw from your course, you will be required to complete the standard student exit clearance process.

1. STUDENT DETAILS							
Name:			Student No:				
Course:							
2. REASON FOR WITHDRAWAL							
	Course not appr	opriate					
	Studying elsewhere						
	Family/personal circumstances						
	Work commitments						
	Health issues						
	Change of circumstances						
	Financial						
	Other (provide details if applicable):						
Date of withdrawal:							



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I declare that the information I have submitted in this application is true, correct and not misleading. I understand that AFTRS may vary or reverse any decision concerning my application or not process my application if this is not the case, and that giving false or misleading information may also be an offence under the *Criminal Code*. [I authorise AFTRS to contact any person or organisation giving supporting documents for the purpose of verifying the information they contain.]

SIGNED:				DATE:		
4. PRIVACY	4. PRIVACY INFORMATION					
Where require Australian gove law and AFTRS	ed to meet AFT ernment entitie of <u>Privacy Policy</u> d how you may o	FRS' legal or administra s. AFTRS collects and de	cation, and in supporting do ative obligations, AFTRS ma eals with your personal inforr ou may access and correct t vacy breaches.	y disclose nation acco	informa ording to	tion in it to othe Australian privac
5. RECOMM	IENDATION AI	ND APPROVAL				
Application received in the Student Centre:					Date:	
			T			
Program Con Recom	venor: nmended	Not Recommended	Signature:		Date:	
Head of Stude	ent Centre or de ved	elegate: Not Approved	Signature:		Date:	

6. 3	STU	IDENT	CENTRE	NOTES:
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