

Deferral Suspension Cancellation Withdrawal (DSCW) Form

Section 1 – Client Details			
Name:			
Contact Tel:		Mobile:	
Email:			
Qualification / Course:		Course Date:	/ /

Section 2 – Change Details at student request			
<input type="checkbox"/> I wish to withdraw from this course. I understand I need to abide by the Refunds Policy.			
Withdrawal Date:	/ /		
Withdrawal Reason:			
Signature		Date:	/ /
<input type="checkbox"/> I wish to defer to another course date. I understand my deferral will be subject to course availability.			
Transfer to Date:	/ / or / /		
Transfer Reason:			
Signature		Date:	/ /
<input type="checkbox"/> I wish to Transfer to another course. I understand there may be further fees involved.			
Course Transfer Date:	/ /		
Course Transfer Reason:		New Delivery Mode:	<input type="checkbox"/> Classroom <input type="checkbox"/> Correspondence <input type="checkbox"/> Online
Signature		Date:	/ /
<input type="checkbox"/> I wish to cancel my enrolment in this course. I understand that my enrolment has an expiry date.			
Defer to Date:	/ /		
Deferral Reason:			
Signature		Date:	/ /



Section 3 – Change Details at provider’s request

Australian Technical College wish to cancel the student’s enrolment in this course.

Defer to Date:	/ /		
Deferral Reason:			
Signature		Date:	/ /
<input type="checkbox"/> Australian Technical College wish to suspend the student’s enrolment in this course.			
Defer to Date:	/ /		
Deferral Reason:			
Signature		Date:	/ /

Section 4 – Authorisation

Finance has cleared this request Yes No

Requested Change has been approved? Yes No

Signature:		Finance Position:	
Signature:		Position:	
Print Name:		Date Processed:	

Admin Use Only

Changed in SMS:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date:	/ /
Logged By:			Signature:	
Formal Letter/Email Sent:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date:	/ /
Sent By:			Signature:	