

**Course Withdrawal/Defer/Amendment Form**

Section 1 – Student Details			
Name:			
Contact Tel:		Mobile:	<input type="checkbox"/>
Email:			<input type="checkbox"/>
Qualification / Course:		Course Date:	<input type="checkbox"/> / /
Section 2 – Change Details			
<input type="checkbox"/> I wish to withdraw from this course. I understand I need to abide by the Refunds Policy.			
Withdrawal Date:	<input type="checkbox"/> / /		
Withdrawal Reason:			
Signature		Date:	<input type="checkbox"/> / /
<input type="checkbox"/> I wish to transfer to another course date. I understand my transfer will be subject to course availability.			
Transfer to Date:	<input type="checkbox"/> / / or <input type="checkbox"/> / /		
Transfer Reason:			
Signature		Date:	<input type="checkbox"/> / /
<input type="checkbox"/> I wish to transfer to another Delivery Mode. I understand there may be further fees involved.			
Transfer Date:	<input type="checkbox"/> / /		
Transfer Reason:		New Delivery Mode:	<input type="checkbox"/> Classroom <input type="checkbox"/> Correspondence <input type="checkbox"/> Online
Signature		Date:	<input type="checkbox"/> / /
<input type="checkbox"/> I wish to Defer my enrolment in this course. I understand that my enrolment has an expiry date.			
Defer to Date:	<input type="checkbox"/> / /		
Deferral Reason:			
Signature		Date:	<input type="checkbox"/> / /
Section 3 – Authorisation			