

COURSE VARIATION FORM (Withdraw or Transfer) 2020
Section 1 – Client Details

Name:		Student ID:	
Contact Tel:		Mobile:	
Email:			

Section 2 – Change Details - Please provide details of course/s this application relates to:

Qualification / Course:		Course Date:	/ /
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 I wish to withdraw from this course. I understand I need to abide by the Refunds Policy.

Withdrawal Date:	/ /
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Withdrawal Reason:	
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Student Signature		Date:	/ /
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 I wish to Transfer to another RTO I understand that I must supply a valid offer letter from other RTO.

Transfer to Date:	/ / or / /
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Transfer Reason:	
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Student Signature		Date:	/ /
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**NB All applications are subject to face to face meeting with Student Services to discuss your application.

Section 3 – Authorisation

 Requested Change has been approved? Yes No

Signature:		Position:	
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Print Name:		Date Processed:	
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Admin Use Only

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