

# Application to Withdraw



*Please ensure to fill this form correctly. Incorrect or incomplete forms will result in delays or rejections*

<b>Title: Mr / Ms / Miss / Mrs</b>	<b>Student Name:</b>
<b>Student Number:</b>	<b>Phone:</b>
<b>Course Title:</b>	<b>Email:</b>
<b>Group:</b>	<b>Date:</b>

## Student Withdrawal Request

I (Print Name) \_\_\_\_\_ Student Number \_\_\_\_\_ am enrolled at YES College and wish to apply to withdraw from my studies in the course(s) listed below (List all courses you wish to withdraw from):

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I commenced my studies / was scheduled to commence my studies on \_\_\_\_\_ and have completed approximately \_\_\_\_\_ hours / weeks of study in my course.

**Student Reason for Withdrawal (Please detail your reason(s) for wishing to withdraw from your course(s) and attach any supporting documentation to support your request. Attach additional sheets if necessary)**

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# Application to Withdraw



By signing this document, you are indicating that you are aware of YES College's Student Deferment, Suspension and Cancellation Policy, Student Refund Policy and terms and conditions stipulated in your Offer Letter and Student Acceptance Agreement.

I (Print Name) \_\_\_\_\_ declare that all information and supporting documentation provided by me is true and correct. I understand that providing false information to YES College may result in termination of my enrolment and/or entitlements.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please note: If you are on a student visa and your cancellation request is approved, government legislation requires YES College to inform the Department of Home Affairs of the cancellation. This may affect your student visa.

## Office use only.

Application Received By	Name:	Signature:	Date:
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Application Approved or Rejected  
(Please circle)

Action Taken By	Name:	Signature:	Date:
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Staff Comments: