

Course Withdrawal/defer/amendment Form

Section 1 – Client Details

Name:			
Contact Tel:		Mobile:	
Email:			
Qualification / Course:		Course Date:	/ /

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:	/ /		
Withdrawal Reason:			
Signature		Date:	/ /
<input type="checkbox"/> I wish to Transfer to another course date. I understand my transfer will be subject to course availability.			
Transfer to Date:	/ /	or	/ /
Transfer Reason:			
Signature		Date:	/ /
<input type="checkbox"/> I wish to Transfer to another Delivery Mode. I understand there may be further fees involved.			
Transfer Date:	/ /		
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 Defer my enrolment in this course. I understand that my enrolment has an expiry date.			
Defer to Date:	/ /		
Deferral Reason:			
Signature		Date:	/ /

Section 3 – Authorisation

Requested Change has been approved?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Course Withdrawal/defer/amendment Form

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: