

# ITHEA Application to: (select one)

**Defer from Studies**

**Temporarily Suspend Studies**

**Cancel Studies**

## Definitions:

Deferral	Postponement of commencement of course.
Suspension	Temporary postponement of enrolment during course.
Cancellation	To cease enrolment or withdraw from a course.
DOHA	Department of Home Affairs.

## IMPORTANT!

- All temporary suspensions, regardless of their duration, must be reported to DOHA.
- Should you apply for a deferment or suspension of studies, this may affect your course completion date.
- This form **MUST** be submitted to the Student Manager for approval.
- Charges are subjected to The Agreement to terms and conditions of enrolment.
- **You will be notified of your application status within 10 working days from the date of receipt.**
- If you change your address during the period of suspension/deferment/cancellation, please contact us to ensure your address details are updated for future correspondence.

## Personal Details\* COMPULSORY

<b>FAMILY NAME:</b>		<b>GIVEN NAME:</b>	
<b>GENDER:</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>	<b>DATE OF BIRTH:</b>	<b>Student No:</b>
<b>ADDRESS:</b>			
<b>SUBURB/CITY:</b>		<b>POST CODE:</b>	
<b>PHONE:</b>		<b>EMAIL:</b>	

## COURSE: (please tick ✓)

Community Services	Business – Leadership & Management
<input type="checkbox"/> CHC33021 Certificate III in Individual Support	<input type="checkbox"/> BSB30120 Certificate III in Business
<input type="checkbox"/> CHC43015 Certificate IV in Ageing Support	<input type="checkbox"/> BSB40120 Certificate IV in Business
<input type="checkbox"/> CHC43121 Certificate IV in Disability Support	<input type="checkbox"/> BSB50120 Diploma of Business
<input type="checkbox"/> CHC43113 Certificate IV in Child, Youth & Family Intervention	<input type="checkbox"/> BSB60120 Advanced Diploma of Business
<input type="checkbox"/> CHC50313 Diploma of Child, Youth & Family Intervention	<input type="checkbox"/> BSB40520 Certificate IV in Leadership and Management
<input type="checkbox"/> CHC43315 Certificate IV in Mental Health	<input type="checkbox"/> BSB50420 Diploma of Leadership and Management
<input type="checkbox"/> CHC53315 Diploma of Mental Health	
<input type="checkbox"/> CHC52021 Diploma of Community Services	
Children's Services	
<input type="checkbox"/> CHC30121 Certificate III in Early Childhood Education and Care	<input type="checkbox"/> CHC50121 Diploma of Early Childhood Education and Care
English	
<input type="checkbox"/> General English	

### Details of Deferment/Suspension/Cancellation\* (Please refer to definitions)

#### Reason for suspension/deferment/cancellation: (please tick✓)

<input type="checkbox"/>	Financial problems	<input type="checkbox"/>	Unable to cope with the course	<input type="checkbox"/>	Family Obligations
<input type="checkbox"/>	Personal matters	<input type="checkbox"/>	Illness/Medical Conditions	<input type="checkbox"/>	Family Bereavement
<input type="checkbox"/>	Other				

Details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of proposed deferment/suspension/cancellation: From: \_\_\_\_\_ To: \_\_\_\_\_  
(Circle ONE)

### Student's declaration

- I declare that the information supplied on this form and the information given in support of my application is correct and complete.
- I authorise ITHEA to obtain official student records from any educational institution necessary to make an informed decision about the application or matters that concern enrolment.
- I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application may result in a delay in the assessment of the offer of a place.
- I am aware that the decision to grant deferral/suspension or cancellation or enrolment may affect my student visa and if I am not enrolled in any course for a period of more than 28 days I may be required to return to my country unless approved by DOHA.

\_\_\_\_\_  
(Student's Signature)\*

\* COMPULSORY

\_\_\_\_\_  
(Date)\*

OFFICE USE ONLY							
Course progress:	Satisfactory		Not Satisfactory				
Skills Victoria Status:	Hours Entered		Results entered		Withdrawn		
Fees:	Owing		Up to date		Paid in full		
Status:	Approved		Not Approved				
Comments							
Approved by:				Position:		Date:	
Approval/Refusal letter issued by						Date:	
CoE affected	Yes		No				
Entered on VETTRAK	Yes		No		Entered by:	Date:	
Entered in PRISMS	Yes		No		Entered by:	Date:	
Letter of Release	Sent by:			Signature:		Date sent:	
Accounts Notified	Adjusted by:			Signature:		Date Adjusted:	