

Student Course Withdrawal or Deferment Form

Student Name:			Student Care Academ Number:	У	
Date:					
Course Code:		Course Title:			
Reason for submitting form	 □ WITHDRAWAL from Course – i.e., student is terminating current registration OR □ DEFERMENT from Course – i.e., student wishes to delay/postpone current registration and return to studies at Care Academy at a later date 				
Student Declaration					
Iam submitting this form after I have discussed my situation with Student Support and I have determined that this is the best action for me to take.					
I understand that:					
If I am withdrawing, I will receive the AQF certification only for the units that I have received a Competent, CT or RPL for. If I am deferring, I can apply to receive an academic transcript/record of my results to the date of deferment. For both withdrawing and deferring I am required to finalise all payments to Care Academy prior to receiving any certification or transcript. If I am withdrawing and I decide that I wish to continue my studies at a later date, I will be required to register and all registration fees and conditions will apply. These fees can be found on the Student Fees Overview provided upon enrolment and available upon request. I am required to complete all exiting and deferment documentation as directed by Care Academy which includes completing student surveys prior to receiving any certification or transcript.					
Reason	De	etails		dence attached to this form in sport of your reason	
E.g., lost job, lost ind no longer interested	come, changed job,		344	port or your reason	
Change in my perso	nal requirement				
E.g., family reasons, location, sickness, a	_				
Other					
If other, please prov	ride a reason				
Student Signature:		Date	: / /		
Student Services Rep	resentative Name:	Date	: / /		
Signature:					
		,			

Document na	ne: Student Course withdrawal or deferment form 202310 V2	Page 1 of 1
Document control management - Uncontrolled when printed		© Care Academy 2023