

### STUDENT DETAILS

Family Name:		Student Number:	
Given Name(s):			
Date of birth: dd / mmm / yyyy		Phone:	
Postal Address:			
City:	State:	Post Code:	
Preferred Email:			
Education Agent Company Name and Agent's Name:			
Choose Two: <input type="checkbox"/> Melbourne City Campus <input type="checkbox"/> Sydney City Campus <input type="checkbox"/> MEGT Institute <input type="checkbox"/> ABILITY English			
Currently Enrolled Course:			
Initial Course Start Date: Mon ____/____/____		Last Course End Date: Fri ____/____/____	

### ENROLMENT AMENDMENT DETAILS (PLEASE MARK "X")

<input type="checkbox"/> I wish to <b>CANCEL</b> my enrolment due to: (For students that have not yet commenced)	<input type="checkbox"/> Visa not granted (must attach: visa refusal letter issued by DIBP, copies of passport data and signature pages and Refund Application form) <input type="checkbox"/> Medical reasons (attach documentation, Medical certificate/s and Refund Application form) <input type="checkbox"/> Compassionate and/or compelling reasons (attach documentation and Refund Application form) <input type="checkbox"/> Other _____ (attach documentation and Refund Application form)
Planned Start Date (before cancellation): ____/____/____	
<input type="checkbox"/> I wish to <b>DEFER/BRING FORWARD</b> my enrolment due to: (For students that have not yet commenced and wish to change their start date.)	<input type="checkbox"/> Medical reasons (attach documentation and Medical Certificate/s) <input type="checkbox"/> Compassionate and/or compelling reasons (attach documentation) <input type="checkbox"/> Other _____ (attach documentation)
New Start Date: Mon ____/____/____	Original Start Date: Mon ____/____/____
<input type="checkbox"/> I wish to <b>WITHDRAW</b> my enrolment due to: (For students that have commenced and wish to stop their studies)	<input type="checkbox"/> Medical reasons (attach documentation and Medical Certificate/s) <input type="checkbox"/> Compassionate and/or compelling reasons (attach documentation) <input type="checkbox"/> Other _____ (attach documentation)
Withdrawal Date (last day of study): Fri ____/____/____	
<input type="checkbox"/> I wish to <b>TRANSFER</b> to another Education Provider prior to completing six (6) months of my principal course.  (Note: A Release Letter will be issued only if application is approved)	<b>Must attach:</b> <input type="checkbox"/> Letter of Offer from another institution <input type="checkbox"/> Statement of reasons <input type="checkbox"/> Supporting documentation
Last Day of Study: Fri ____/____/____	
Details of the course I wish to transfer to: Course: _____ Institution: _____ Expected Start Date: ____/____/____	



**APPLICATION OUTCOME**  
 (OFFICE USE ONLY)

**Finance Action Items:**
 **Non-Commenced Student:**

 Has student paid fees before commencement?                      NO                       YES                       Paid Amount: \$ \_\_\_\_\_

 **Commenced Student:**

 Has the student paid up until last day of **actual** study?                      NO                       YES 

 If no, how much do they owe up to last day of **actual** study? \_\_\_\_\_                      Due Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Refund amount to student: \$ \_\_\_\_\_

Additional Information/Reason for Decision:

Accountant:

Signature:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Campus Manager Action Items:**

Supporting evidence:

- Visa refusal letter
- Passport copy
- Statement of reasons
- Letter of offer from other institution
- Medical certificate/s
- Evidence of compassionate and/or compelling circumstances
- Return home flight ticket
- Refund application form
- Other.....

 Approved: 

 Not Approved: 

Additional Information/Reason for Decision:

Campus Manager/Nominated Officer:

Signature:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Admissions Action Items:**

Approved form received by ADM on \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_\_

- |   |                     |                |
|---|---------------------|----------------|
| <input type="checkbox"/> Enter AoE decision in PEPi                             | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> Notice of decision sent to student*                    | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> Release Letter issued (if approved)                    | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> CoE/s cancelled  | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> New CoE/s issued                                       | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> Student Default reported on PRISMS (visa refusal only) | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> Outcome recorded in PRISMS (visa refusal only)         | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> Notify EM to truncate TT (for WD & CXL)                | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> Notify SS to add TT (for suspension only)              | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> PEPi updated and notes added                           | Date ____/____/____ | Initials _____ |
| <input type="checkbox"/> All relevant AoE documents uploaded to PEPi            | Date ____/____/____ | Initials _____ |

\*For visa refusal: 3 working days from receipt of form by ADM. For all other cases: 5 working days from receipt of form by ADM