

Withdrawal of Enrolment Request Form

PLEASE FILL IN ALL FIELDS ON THIS FORM

Note

- This form is for students who wish to withdraw from their course(s).
- Allow up to 20 working days from lodgement of a full application to be assessed. Whilst an application is being reviewed students are expected to continue to attend and participate in all course activities.
- Students should not withdraw from studies until they have been advised of the decision.
- The completed form and supporting evidence should be submitted to Student Support at your current campus or sent to reachstudentsupport@vconsultancy.com.au.

Section A – Student Details	
Student number:	Visa type and subclass:
Family name:	Given names:
Mobile:	Email:
Residential address:	
Section B – Course Details	
Course(s) you wish to withdraw from:	
<p>Please indicate the reason by ticking the appropriate box:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Change in visa status or conditions <input type="checkbox"/> Leaving Australia permanently <input type="checkbox"/> Completed 6 months of principal course at Reach and transferring to another provider <input type="checkbox"/> Other <p>Please explain the details:</p>	
Section C - Student Declaration	
<ul style="list-style-type: none"> • I have read and understood the above note and relevant College policies. • I declare that the information provided is true and complete. • I acknowledge that the provision of incorrect information or the withholding of relevant information may delay the processing of my application. • I consent to the College contacting medical practitioners/any third parties for the purpose of verifying the information provided in this form and confirming the authenticity of the supporting evidence that I have provided. • I understand that it is my responsibility to seek advice from relevant authorities including the Department of Home Affairs regarding the possible impacts to my visa. 	
Signature of student:	Date (dd/mm/yy):
If the student is under 18, the form is to also be signed by the parent/guardian:	
Signature of parent/guardian:	Date (dd/mm/yy):

Office Use Only – Student Support	
Date application received:	Received by:
Application outcome: <input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
Date processed:	Processed by:
Further comments (if required):	