

Application for Course Deferment / Transfer / Withdrawal

Student request	
Name:	
Student number:	
Course:	
Request type:	<input type="checkbox"/> Defer enrolment for up to 12 months <input type="checkbox"/> Transfer enrolment to an alternate course <input type="checkbox"/> Withdraw from the course and terminate enrolment
Reason for requesting course withdrawal:	
Sign:	Date:

CEO action	
Name:	
Action:	<input type="checkbox"/> Approved <input type="checkbox"/> Not approved
Reason for decision:	
Sign:	Date: