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| **COURSE CANCELLATION / WITHDRAWAL FORM - Domestic** |
| **SECTION A - PERSONAL DETAILS** |
| **STUDENT NAME:** |  |
| **STUDENT ID:** |  | **DATE OF BIRTH** |  |
| **COURSE CODE:** |  |
| **COURSE NAME:** |  |
| **CONTACT NUMBER:** |  |
| **ADDRESS**  |  |
| **SECTION B - REQUEST** |
| **I would like to apply for**[ ]  **Cancellation/Withdrawal****of my enrolment at Education Training and Employment Australia and I am aware that:*** 1. I must attach any relevant supporting documentation to this application form, or as soon as possible after lodging this form.
	2. This form will only be assessed once all documentation has been received.
	3. ETEA may ask for more documentation, if required.
	4. Applications are usually processed within 5 working days after the submission of all the required documentation.
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| **Reason for the Request:**  |
| **SECTION C – EVIDENCE DOCUMENTATION ( IF APPLICABLE)** |
| Please indicate the type of evidence documentation you are attaching to your application.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| I declare that all the information provided in this document is true and correct. Student’s signature: ................................................................. Date: ....../....../...... |
| **SECTION D – OFFICE USE ONLY** |
| [ ] APPROVED – Please attach Letter of approval/Email to this form and provide a copy to the student.[ ] NOT APPROVED - Please attach the refusal letter and provide a copy to the student.ETEA Authorised StaffPrint Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |