

STUDENT WITHDRAWAL REQUEST FORM

1. STUDENT DETAILS

Student ID Number:

Student Name:

Date of Birth:

Course Name:

2. WITHDRAWAL REQUEST

- ☐ I wish to withdraw my studies in the above course, effective from ____/____/____ because *(please write reasons below)*:

and

- ☐ I've enclosed the following evidence to support my request *(please tick)*:

- ☐ A flight itinerary of returning home, or
☐ A copy of the letter of offer and CoE from a new provider, or
☐ A copy of change of visa, or
☐ Other evidence (please name)

3. STUDENT DECLARATION

I certify that all information including any supporting evidence provided in this request are true and correct. I also declare that I have read and understood the relevant policies of the college in regard to the withdrawal including fees and charges, and also possible effects to my student visa status under various government legislation.

Signature:

Date:

4. SUBMISSION OF FORM

Please submit the completed form using one of the options below:

Email: admissions@sydneyinet.edu.au

In Person: Sydney Met, 2-4 Marmaduke St, Burwood, NSW 2134, AUSTRALIA

OFFICE USE ONLY

Withdrawal Request ☐ Approved ☐ Not approved

Comments:

Approving Officer's Name:

Signature:

Date:

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