



CHANGE OF ENROLMENT FORM (WITHDRAWAL/DEFERMENT)

Written request from Student – email/letter/evidence that supports application must be attached to this Form, where applicable

Full Name:

Student ID Number: CK-

Email:

Contact Phone Number:

Current Course Enrolled:

Applying for: *(tick)*

Withdrawal
(go to Section 1)

Deferment
(go to Section 2)

Other
(go to Section 1)

Please outline Reason:

Section 1 *(Finance to attach the Statement of Accounts with this Form prior to sending for Approval)*

Withdrawal or Other Reason

Please tick:

Refund

Credit Note

Preferred Method of Refund *(tick)*:

Cheque

Credit Card

Master Card / Visa
(circle one)

Card No:

Expiry Date:

Bank Deposit

BSB:

Account No:

Bank:

Account Name in Full:

Section 2

Deferment

Date when deferment is applied for: / /

(Note: you may only apply for 6 months)

Date you wish to recommence your studies: / /

You have the right to appeal any decision made with which you disagree. This must be done within 20 days of the date of Career Keys' decision and using the Complaints Lodgement Form (available on Career Keys' website).

Student or Parent/Guardian Signature:

Date of this Application:

/ /



Office Use Only: Withdrawal and Other Reason

Approval/Not Approval Decision:	
Training Fees <input type="checkbox"/> Full Refund <input type="checkbox"/> Partial Refund – Specify: <input type="checkbox"/> No Refund – Specify:	Material Fees (where applicable) <input type="checkbox"/> Full Refund <input type="checkbox"/> Partial Refund for Material <u>not</u> issued <input type="checkbox"/> No Refund – Specify:
Operations Manager <input type="checkbox"/> Refund Approved <input type="checkbox"/> Refund Not Approved Date: / / Signature:	Office Use Only Refund Amount: \$ _____ Refund No: _____ Change of Enrolment Actioned: <input type="checkbox"/> Yes <input type="checkbox"/> No If <u>not</u> approved, date letter sent: _____ Processed by: _____
Finance Officer <input type="checkbox"/> Refund Approved <input type="checkbox"/> Refund Not Approved Date: / / Signature:	

Deferment

Deferment Decision:	
Career Keys advises that as of: / / you have been deferred from your course.	
The deferment will only remain valid until: / /	
Once the deferment end date has been reached, any prior agreed payment plans will re-open and payments will continue as previous.	
Operations Manager	
<input type="checkbox"/> Deferment Approved <input type="checkbox"/> Deferment Not Approved. Reason:	
Signature:	Date: / /
1. Date Payment arrangement placed on hold:	_____ / _____ / _____ Career Keys' officer initials:
2. Amended PayWay to recommence Payment Plan on:	_____ / _____ / _____ Career Keys' officer initials:
3. Payment Re-commencement actioned on:	_____ / _____ / _____ Career Keys' officer initials:
CHECK (tick):	
<input type="checkbox"/> Scanned copy of this Form saved on Axcelerate with note confirming outcome. <input type="checkbox"/> Hard copy placed on Student File. <input type="checkbox"/> Student has been advised of the outcome. <input type="checkbox"/> Trainer & Assessor has been advised of the outcome. <input type="checkbox"/> All relevant refund/deferment tasks actioned.	
Name of Career Keys' officer:	
Signature:	Date: / /