

# DEFERRAL APPLICATION FORM



## A. DETAILS

STUDENT DETAILS			
SURNAME		FIRST NAME	STUDENT NUMBER
CURRENT RESIDENTIAL ADDRESS			
BUILDING/PROPERTY NAME		FLAT/UNIT NUMBER	STREET/LOT NUMBER
STREET NAME	TOWN/SUBURB	STATE	POSTCODE
COURSE NAME			
FOR WHICH COURSE ARE YOU SEEKING A DEFERRAL FROM?			
REASON/S FOR DEFERRAL			
<input type="checkbox"/> ACADEMIC DIFFICULTIES	<input type="checkbox"/> FINANCIAL	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> HEALTH
<input type="checkbox"/> OTHER _____			
DATES FOR DEFERRAL			
FROM		TO	

**Please Note:** A deferral may affect your student visa. You must contact the Department of Home Affairs for visa information before submitting this form. Contact DHA by phone on 131 881 or through their website at [www.homeaffairs.gov.au](http://www.homeaffairs.gov.au)

## B. DECLARATION

I hereby apply for a deferral and acknowledge that this application will be processed in accordance with the Alana Kaye College Deferral, Suspension and Cancellation Policy, which I have read and understood.

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
DATE

## C. OFFICE USE ONLY

RECEIVED BY	DATE RECEIVED
APPLICATION APPROVED BY	
APPLICATION DECLINED BY	
COMMENTS	
ACTIONED BY	DATE ACTIONED
STUDENT ADVISED	DATE SENT