



DEFERRAL, SUSPENSION OR CANCELLATION REQUEST FORM

Student Details

Field	Information
Student Full Name	
Student ID	
Course Name	
CRICOS Course Code	
Contact Number	
Email Address	

Type of Request

(Please select one)

- Deferral** – Before course commencement (attach supporting evidence)
- Suspension** – Temporary break from study (attach documents)
- Cancellation** – Permanent withdrawal from course

Is this request: Student-initiated Provider-initiated (Academic/Conduct/Other)

Reason for Request



(Please tick all relevant boxes and provide documentation)

- Compassionate or compelling circumstances (e.g. illness, family emergency)
- Personal reasons (explain below)
- Academic progress intervention plan in place
- Misconduct (provider-initiated only)
- Visa delay/refusal (attach documents)
- Employment-related (not valid for CRICOS)
- Other: _____

Please provide a brief explanation:

Attach supporting documentation such as medical certificates, visa notifications, or counselling letters.

Requested Dates of Change

Action	Date
Start of deferral/suspension/cancellation	___ / ___ / 20___
Expected return (if applicable)	___ / ___ / 20___

Important Information for Students

- ✚ Submitting this form does not guarantee approval.
- ✚ All requests must be supported with appropriate documentation.
- ✚ Changes to your enrolment may affect your student visa. You are advised to contact the Department of Home Affairs.
- ✚ If your request is approved, your CoE will be updated in PRISMS accordingly.



- ✦ If this is a provider-initiated action, you have the right to appeal the decision within 20 working days under the Complaints and Appeals Policy.

Student Declaration

I declare that the information provided above is accurate and supported by appropriate documentation. I understand the implications for my visa and enrolment.

Student Signature: _____

Date: ___ / ___ / 20__

RTO Office Use Only

Item	Details
Request Received By	[Name] on ___ / ___ / 20__
Action Taken	<input type="checkbox"/> Approved <input type="checkbox"/> Rejected
Approved By	[CEO / Compliance Officer]
Date Processed	___ / ___ / 20__
Notes	
PRISMS Updated	<input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
Student Notified	<input type="checkbox"/> Yes <input type="checkbox"/> No