Student Details

Name:		**Student ID:**	
Contact Tel:		**Mobile:**	
Email:			
Course(s):		**Course Start Date:**	

Change Details at student request

☐ **I wish to withdraw from this course**. I understand I need to abide by the *Fees, Charges and Refunds* Policy.

Withdrawal Date:	
Withdrawal Reason:	
Signature		**Date:**	

☐ **I wish to defer to another course date.**   I understand my deferral will be subject to course availability.

Transfer to Date:	
Transfer Reason:	
Signature		**Date:**	

☐ **I wish to Transfer to another course**. I understand there may be further fees involved.

Course Transfer Date:	
Course Transfer Reason:		**New Delivery Mode:**	☐ Classroom ☐ Correspondence ☐ Online
Signature		**Date:**	

☐ **I wish to cancel my enrolment in this course**. I understand that my enrolment has an expiry date.

Defer to Date:	
Deferral Reason:	
Signature		**Date:**	

Change Details at provider's request			
☐ **AIT wishes to cancel the student's enrolment in this course**.			
Defer to Date:			
Deferral Reason:			
Signature		**Date:**	
☐ **AIT wishes to suspend the student's enrolment in this course**.			
Defer to Date:			
Deferral Reason:			
Signature		**Date:**	

Authorisation			
Finance has cleared this request	☐ Yes	☐ No	
Requested Change has been approved?	☐ Yes	☐ No	
Signature:		**Finance Position:**	
Signature:		**Position:**	
Print Name:		**Date Processed:**	

Admin Use Only				
Changed in SMS:	☐ Yes	☐ No	**Date:**	
Logged By:			**Signature:**	
Formal Letter/Email Sent:	☐ Yes	☐ No	**Date:**	
Sent By:			**Signature:**	

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