

ITHEA Application to: *(select one)*

Defer from studies	Temporarily suspend studies	Cancel studies
Definitions: Deferral Postponement of commencement of course. Suspension Temporary postponement of enrolment during course. Cancellation To cease enrolment or withdraw from a course. DOHA Department of Home Affairs.		
IMPORTANT! <ul style="list-style-type: none"> All temporary suspensions, regardless of their duration, must be reported to Skills Victoria. Should you apply for a deferment or suspension of studies, this may affect your course completion date. This form MUST be submitted to the Student Manager for approval. Charges are subjected to The Agreement to terms and conditions of enrolment. You will be notified of your application status within 10 working days from the date of receipt. If you change your address during the period of suspension/deferment/cancellation, please contact us to ensure your address details are updated for future correspondence. 		

Personal details* COMPULSORY			
FAMILY NAME:		GIVEN NAME:	
GENDER:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	DATE OF BIRTH: <input type="text"/> Student No: <input type="text"/>
ADDRESS:			
SUBURB/CITY:		POST CODE:	
PHONE:		EMAIL:	

COURSE: <i>(please tick ✓)</i>	
Community Services	Business – Leadership & Management
<input type="checkbox"/> CHC33015 Certificate III in Individual Support (Ageing)	<input type="checkbox"/> BSB30120 Certificate III in Business
<input type="checkbox"/> CHC33015 Certificate III in Individual Support (Disability)	<input type="checkbox"/> BSB40120 Certificate IV in Business
<input type="checkbox"/> CHC43015 Certificate IV in Ageing Support	<input type="checkbox"/> BSB50120 Diploma of Business
<input type="checkbox"/> CHC43115 Certificate IV in Disability	<input type="checkbox"/> BSB60120 Advanced Diploma of Business
<input type="checkbox"/> CHC52015 Diploma of Community Services	<input type="checkbox"/> BSB40520 Certificate IV in Leadership and Management
<input type="checkbox"/>	<input type="checkbox"/> BSB50420 Diploma of Leadership and Management
Children's Services	
<input type="checkbox"/> CHC30121 Certificate III in Early Childhood Education and Care	<input type="checkbox"/> CHC50121 Diploma of Early Childhood Education and Care
English	
<input type="checkbox"/> General English	<input type="checkbox"/>

Details of Deferment/Suspension/Cancellation* *(please refer to definitions)*

Reason for suspension/deferment/cancellation: <i>(please tick ✓)</i>		
<input type="checkbox"/> Financial problems	<input type="checkbox"/> Unable to cope with the course	<input type="checkbox"/> Family Obligations

Personal matters	Illness/Medical Conditions	Family Bereavement
Other		
Details: _____ _____ _____		
Date of proposed deferment/suspension/cancellation: From: _____ To: _____		

Student's declaration

- I declare that the information supplied on this form and the information given in support of my application is correct and complete.
- I authorise ITHEA to obtain official student records from any educational institution necessary to make an informed decision about the application or matters that concern enrolment.
- I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application may result in a delay in the assessment of the offer of a place.
- I am aware that the decision to grant deferral/suspension or cancellation or enrolment may affect my student visa and if I am not enrolled in any course for a period of more than 28 days I may be required to return to my country unless approved by the Department of Home Affairs.

 (Student's signature)*

 (Date)*

*** COMPULSORY**

OFFICE USE ONLY									
Course progress:	Satisfactory			Not Satisfactory					
Skills Victoria status:	Hours entered			Results entered			Withdrawn		
Fees:	Owing			Up to date			Paid in full		
Status:	Approved			Not Approved					
Comments									
Approved by:				Position:				Date:	
Approval/Refusal letter issued by							Date:		
CoE affected	Yes		No						
Entered on VETTRAK	Yes		No		Entered by:		Date:		
Entered in PRISMS	Yes		No		Entered by:		Date:		
Letter of Release	Sent by:			Signature:			Date sent:		
Accounts notified	Adjusted by:			Signature:			Date adjusted:		