

DEFERMENT, SUSPENSION OR CANCELLATION OF COURSE FORM

Personal Details

Family Name: Given Names:

Title: Mr Mrs Miss Ms Other

Sex: Male Female

Course Details

Course Name:

Last Date of Attendance:

I am applying for:

Deferment. What date do you wish to re- commence your course?

Suspension

Course cancellation

Reason for deferment, suspension or cancellation of the course:

Note: Students may only apply to defer or suspend their courses in compassionate or compelling circumstances which are generally those beyond the control of the student or likely to have an impact upon the students' course progress or wellbeing.

Contact Details

Home Address:

Postal Address (if different to home address):

Telephone:

Email Address:

Student signature _____ Date: _____