


DEFERRAL REQUEST

PERSONAL DETAILS

Family Name	<input type="text"/>	Student ID	<input type="text"/>
Given Name	<input type="text"/>	Course Enrolled	<input type="text"/>
Contact No.	<input type="text"/>	Email	<input type="text"/>

DEFERRAL DETAILS

ORIGINAL COMMENCEMENT TERM				NEW COMMENCEMENT TERM				
Term (Month)	<input type="text"/>	Year	<input type="text"/>	➔	Term (Month)	<input type="text"/>	Year	<input type="text"/>

 **International Students** can defer for (a maximum of) one (1) term only
Domestic Students can defer for a period of up to one (1) year

REASON / GROUNDS FOR REQUEST

INTERNATIONAL STUDENTS	Serious illness	<input type="checkbox"/>	Please ensure you attach / submit a valid medical certificate with your request
	OR		
	Exceptional Circumstances	<input type="checkbox"/>	Please provide details of the circumstances below
Details / Notes (Full reason for the request)		<input type="text"/>	
Note: International students may only defer their commencement in special circumstances			

ATTACHMENTS

Where applicable please attach / submit all supporting documentation to your application

Signature:	<input type="text"/>	Date (dd/mm/yyyy):	<input type="text"/>
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STUDENT ADMINISTRATION USE ONLY

Outcome of Request	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Approver	<input type="text"/>
Entered in PRISMS	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date Received	<input type="text"/>
Entered in Avantis	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Student advised of <i>Outcome of Request</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		