

## Deferral Application Form

### About this form

This form is to be used when making an application to defer your enrolment into a course with us. You may defer your studies for up to 12 months. You must provide evidence of compassionate or compelling circumstances in order to defer your studies. Compassionate and compelling circumstances are personal circumstances that are involuntary and outside your control, for example, medical, family, wellbeing, or enrolment circumstances, and present you with limited or no choice. You must also provide supporting evidence with your application (eg a medical certificate)

The completed form and supporting evidence should be submitted to Student Support at your current campus or sent to [info@thames.edu.au](mailto:info@thames.edu.au).

Please note that course deferral fee is applicable to process this request.

Section A – Student Details				
Surname:		Given names:		
Date of Birth:	Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other
Student number:		Nationality:		
Mobile:		Email:		
Address including street number and name, suburb or town, postcode:				
Postal address (if different):				
Section B – Course Details and Dates of Deferral				
Current course:		Campus:		
Deferral from date:		Resumption date:		

**Section C – Reasons for applying for deferment**

Please briefly describe the reason you have decided to defer your studies:

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**Student Declaration:**

- I have read and understood Thames International Collage course transfer requirements as documented on the previous page.
- I understand that it may take up to ten working days to process my request; provided all relevant documents have been submitted.
- I authorise Thames International Collage to contact the provider to whom I wish to transfer and/or my agent to verify the attached Letter of Offer.
- I understand that if I have not supplied the appropriate documentary evidence or if the information I have supplied is false and misleading, it may affect the outcome of the release application.
- I understand that it is my responsibility to seek advice from relevant authorities including the Department of Home Affairs regarding the possible impacts to my visa.
- I am aware that course deferral fee is applicable to process my request.

Name of student:	
Student ID:	
Signature:	
Date (dd/mm/yy):	