



# AUSTRALIAN STUDY LINK INSTITUTE

Level 2, 123 Lonsdale St  
Melbourne, VIC 3000, Australia  
Phone: +61 3 9639 9951 | Website: www.asli.vic.edu.au  
CRICOS No: 03483G | RTO No : 40794

## Commencement of Studies after Deferment

Students must complete this form if students have decided the date when they want to commence their course after deferment. This form must be submitted within your approved deferment period and/or prior to commencement after the deferment.

### Student Details

Student ID: ..... USI Number: .....

Student Name: .....Date of Birth: .....

Course Code and Name: .....

Address:

.....  
.....

Home Phone: ..... Mobile: .....

Email: .....

Commencement Date:.....

### Declaration

- I agree to commence my course after deferment period on the date mentioned above.
- I understand my obligation as a student.
- I am aware of the attendance and course progress requirements of the course and the institute.
- I agree to abide by the conditions of enrolment as specified in the offer letter and agreement.

Student Signature:.....Date:.....

### Office Use Section

Application received by: .....

Signature: .....Date:.....