



# 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

## Enrolment Cancellation Form

Australian International Student

Off-Shore Student

**Student Name:** .....

**Student ID: ASLI**.....**Date of Birth:** .....

**Address:** .....

.....

**Contact No. (Ph.)** ..... **(Mobile)**.....

**Email:** .....

International students must state the reason for cancelling their program as RTO Connect Pty Ltd T/A Australian Study Link Institute (referred as ASLI) is obliged to report the cancellation to the Department of Home Affairs (DHA). Also, all supporting documents should be attached with this form. Please refer to Fee payment and Refund Policy for any applicable refunds. You can find refund policy at our reception and on our website www.asli.vic.edu.au.

**Please choose the courses below for the cancellation.**

SELECT COURSE	COURSE CODE	Qualification	CRICOS Course Code
[ ]	BSB40520	Certificate IV in Leadership and Management	106803F
[ ]	BSB50420	Diploma of Leadership and Management	104633B
[ ]	BSB60420	Advanced Diploma of Leadership and Management	107072F
[ ]	BSB80120	Graduate Diploma of Management (Learning)	107073E
[ ]	SIT30816	Certificate III in Commercial Cookery	091905E
[ ]	SIT40516	Certificate IV in Commercial Cookery	091906D
[ ]	SIT50416	Diploma of Hospitality Management	091913E
[ ]	SIT60316	Advanced Diploma of Hospitality Management	091914D

Please specify the reason for cancellation of your enrolment:

.....  
.....

Students are requested to complete the section below if enrolment is being cancelled on the basis of Transfer between another provider.

### Transfer to another provider - Request Detail:

Requests will not be processed until supporting documents are provided.

You will have to provide the following evidence for Australian Study Link Institute to be able to process your application request:

1. A copy of a valid enrolment offer letter with an approved provider
2. A letter explaining the reasons for your transfer request.

Australian Study Link Institute has the right to refuse **students release requests made within the first six (6) months of Their Principal course**. Please refer to Australian Study Link Institute Policies and Procedures or your Student Handbook



# 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

Student's Signature: ..... Date: .....

=====

**For Office Use Only**

Received by: .....

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

If enrolment is cancelled on the basis of transfer between providers (complete the sections below)

**Decision**

Release approved?  Yes  No

Reason : \_\_\_\_\_

Comments (If any) \_\_\_\_\_

Date Letter Issued to Student: \_\_\_\_\_

Signature: \_\_\_\_\_ Staff full name: \_\_\_\_\_

Date: \_\_\_\_\_