



## Enrolment Cancellation Form

### Instructions for Students

Use this form if you wish to cancel or withdraw from your enrolment at ASLI. You must attach supporting documents, which may include but are not limited to an airline ticket, new Confirmation of Enrolment (CoE), offer letter from another provider, medical certificate, evidence of compassionate or compelling circumstances, or a visa decision notice. This form should be read in conjunction with ASLI's Deferral, Suspension and Cancellation Policy, Transfer Between Providers Policy, and Fee Payment & Refund Policy. Please note that cancellations may affect your student visa, and you are advised to contact the Department of Home Affairs (DHA) for advice before submitting this form.

☐ Onshore Student

☐ Off-Shore Student

Student Name: .....

Student ID: .....Date of Birth: .....

Address: .....

.....

.....

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

Email: .....

**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            |
|               | SIT30821    | Certificate III in Commercial Cookery         | 109844F            |
|               | SIT40521    | Certificate IV in Kitchen Management          | 109502F            |
|               | SIT50422    | Diploma of Hospitality Management             | 112633B            |
|               | SIT60322    | Advanced Diploma of Hospitality Management    | 112634A            |
|               | CHC33021    | Certificate III in Individual Support         | 120964E            |
|               | CHC43315    | Certificate IV in Mental Health               | 120965D            |
|               | CHC43121    | Certificate IV in Disability Support          | 120966C            |
|               | CHC52025    | Diploma of Community Services                 | 120967B            |

Please specify the reason for cancellation of your enrolment:

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Supporting documents attached: ☐ Yes ☐ No

Would you like to meet with the Student Support or Wellbeing Officer to discuss compassionate or compelling circumstances before proceeding with cancellation?

☐ Yes (If Yes, please also complete a Student Support Request Form)

☐ No



## Important Note

If your cancellation request is due to a transfer between another provider, you must also complete a separate Release Request Form available on our website and at reception in accordance with National Code 2018 Standard 7. This Enrolment Cancellation Form alone will not process transfer requests.

## Terms and Conditions:

- I understand that if I am seeking a fee refund, I must also complete a separate Refund Application Form.
- I understand I may not be eligible for any fee refund if I have not met the terms and conditions outlined in the Fee Payment and Refund Policy.
- Where the cancellation of enrolment has been initiated by ASLI, I am entitled to 20 working days to access the internal Feedback, Complaints and Appeals Process to contest the decision.
- I authorise ASLI to obtain further supporting information or official student records from other institutions where necessary in relation to this application.
- I acknowledge that ASLI will use and manage my personal information in accordance with its Records Management Policy and Privacy Policy.
- I understand that cancellation of my enrolment may impact my student visa and that ASLI is required to report cancellations to the Department of Home Affairs (DHA) via PRISMS.
- I have read ASLI's Deferral, Suspension and Cancellation Policy and understand that changes to my enrolment may result in a change to my CoE and visa status.
- I declare that all information provided on this form is correct and complete in every detail, and I understand that providing false or misleading information may result in rejection of my application.
- I also understand the consequences of cancelling my enrolment before a new visa is granted if my visa is still being processed.
- I have been informed that I may access ASLI's Student Support and Wellbeing Services to discuss my circumstances before finalising this cancellation.
- I acknowledge that ASLI has advised me to contact the Department of Home Affairs (DHA) for advice regarding any potential impacts on my visa before submitting this application.
- By signing this form, I confirm that I have read, understood, and agree to the terms and conditions regarding the cancellation of my enrolment.

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

## For Office Use Only

**Received by:** .....

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

☐ Valid supporting documents are attached

If cancellation relates to transfer between providers, confirm that a Release Request Form has been completed: ☐ Yes ☐ No

Staff Comments (if any):

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.....  
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Processed by.....Signature: .....Date: .....