

SC6.11 Withdrawal or Deferral Form

Student Name:		Student ID:	
Date of Withdrawal:	/ /	Course:	
Workplace (if trainee or apprentice):			
I wish to withdraw from or defer the course I am enrolled in with WISE Workplace. I wish this for the following reason:			
(For deferrals) I propose to recommence study in:			
<i>Specify date, or proposed period for us to get in touch to discuss recommencing</i>			

I or my employer is seeking a refund for fees paid to date ☐ Yes ☐ No

Have your contact details changed since you last advised us of them? ☐ Yes ☐ No If yes, please provide below.

Home Address:			
Suburb:		Postcode:	
Best phone:		Email:	
Student	Employer/Workplace (only required for trainees and apprentices)		
Signed:		Signed:	
Printed Name:		Printed Name:	
Date:		Date:	

Trainees and apprentices: You may need to also complete a traineeship/apprenticeship cancellation form to cancel the agreement with the state training authority.

Please forward this completed form to our office via support@wiseworkplacetraining.com.au. Upon receipt of this form, we will contact you to discuss your withdrawal.

Once your withdrawal has been processed, you will be issued with a statement of attainment for any competencies you have achieved. **This statement cannot be provided until all outstanding fees have been paid.**

If competencies have not been attained, no further notification of withdrawal will be provided by WISE Workplace unless specifically requested.

If you wish to apply for a refund or for consideration of a reduction in outstanding fees, an application must be made in writing to our office using the Refund Application Form. Please refer to our Fees, Charges and Refund Policy for complete details.

