

Student Request to Defer/ Suspend/ Cancel a course

Please note that all requests are **subject to approval** and subject to assessment against Mid City College's Deferral, Suspension and Cancellation Policies.

Date: Student ID:

Given Name: Last Name:

Course:

Mobile: Email ID:

Please select one of the following

I would like to **suspend** my course for a period of time

- Reasons Returning to home country (submit Airline Ticket)
 Medical reason (submit Medical Certificate)
 Other (please detail in attached letter)

Dates From: To:

I would like to **cancel** my course

- Reasons Returning to home country permanently (submit Airline Ticket)
 Medical reason (submit Medical Certificate)
 Applying/Applied for Another Visa (submit DIBP letter)
 Granted Another Visa (submit VISA Copy)
 Transferring to another institution & I need offer letter (attach offer letter)

Dates From: To:

I would like to **defer** my course to a new start date

- Reasons Visa not yet granted
 Current course not yet complete (provide current CoE)
 Medical reason (submit Medical Certificate)
 Other (please detail in attached letter)

Dates From: To:



MID CITY EDUCATION PTY LTD
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Phone: 02 8052 3231
Email: info@midcity.edu.au
Website: www.midcity.edu.au

Have you read Mid City College's refund policy? Yes No
Do you also require a refund? Yes No

Students Signature: Date:
