

ABN: 52 619 783 309 E: admissions@ashley.nsw.edu.au W: www.ashley.nsw.edu.au Level 2, 16-22 Wentworth Avenue Surry Hills NSW 2010 T: 02 9994 0882

## **Application to Withdraw**

Please ensure to fill this form correctly. Incorrect or incomplete forms will result in delays or rejections.

Student ID:	Student Name:			
Phone:	Email:			
Course Name:				
Address:				
Student Withdrawal Request				
I (Print Name)	Student Number			
am enrolled at Sydney College and wish to apply to withdraw my studies in my course(s) stated below (List all				
courses you wish to withdraw from):				
<del></del>				
I commenced my studies / was scheduled to commence my studies on and my last day				
of actual attendance is				
Student Reason for Withdrawal (Please detail your reason(s) for wishing to withdraw from your course(s) and attach any supporting documentation to support your request. Attach additional sheets if necessary)				



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<del></del>					
	t, you are indicating that you are aware of Ashley English Language ment, Suspension and Cancellation Policy, Student Refund Policy and				
	pulated in your Offer Letter and Student Acceptance Agreement.				
	3				
I (Print Name)	declare that all information and supporting				
documentation					
provided by me is true and correct. I understand that providing false information to Ashley English Language Institute					
may result in termination of my enrolment and/or entitlements.					
Student Signature:	Date:				
Please note: If you are on a student visa and your cancellation request is approved, government legislation requires Ashley English Language Institute to inform the Department of Home Affairs of the cancellation. This may affect your student visa.					
Office were less than					
Office use only					
Student Services /	Comments:				



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Department	Name:	Signature:	Date:	
Associate Deposits and	Tuition Fees Clear: Yes / No Admin Fees Clear: Yes / No Comments:			
Accounts Department	Name:	Signature:	Date:	
Action Taken By	Name: Position:	Signature:	Date:	
Application	APPROVED	NOT APPROVED		
Comments:				