

Application for Withdrawal

Learner Details			
Given Name	Click here to enter text.	Surname	Click here to enter text.
Address	Click here to enter text.		
Phone	Click here to enter text.	Mobile	Click here to enter text.
Email	Click here to enter text.	USI Number	Click here to enter text.
Date of Birth	Click here to enter text.	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Enrolment & Withdrawal Details			
Qualification Code	Click here to enter text.		
Qualification Title	Click here to enter text.		
Fees Paid	\$ Click here to enter text.	FEE-HELP Loan	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fee Payer Name	Click here to enter text.		
Address	Click here to enter text.		
Select one of the following options	<input type="checkbox"/> Withdrawal from course <input type="checkbox"/> Withdrawal from units of study on or before census date (no debt incurred or refund given if payment has been made) <input type="checkbox"/> Withdrawal from units of study after census date (no refund given/debt still incurred unless special circumstances apply)		
Reason for withdrawal	Click here to enter text.		
Units of Competency (For withdrawal)			
Unit Code	Unit Title		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		
Click here to enter text.	Click here to enter text.		

Click here to enter text.	Click here to enter text.
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Refund Details

Refunds are payable to the Fee Payer nominated above. Where payments have been made by credit card, refunds can only be issued to the original credit card number. For electronic transfer of funds, please complete details below:

Account Name	Click here to enter text.		
Bank Name	Click here to enter text.	Branch	Click here to enter text.
BSB Number	Click here to enter text.	Account No.	Click here to enter text.

I hereby acknowledge that I have been provided with details of the RTO's Fee and Refund Policy and the information provided in this form is true and correct.

Learner Name	Click here to enter text.		
Learner Signature		Date	Click here to enter text.

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Received by	Click here to enter text.	Date	Click here to enter text.
Approved	<input type="checkbox"/> Yes <input type="checkbox"/> No	Refund Amount	\$ Click here to enter text.

Withdrawal has been granted for the following units

Unit Code	Unit Title
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.