



Year

**PERSON DETAILS**

Name \_\_\_\_\_ Student Number

Surname (Family Name) \_\_\_\_\_

Given/Other Names \_\_\_\_\_

Date of Birth (dd/mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: Number & Street (PO Box No) \_\_\_\_\_

Suburb or Town \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone Number \_\_\_\_\_ Mobile Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

**INTERNATIONAL STUDENTS**

International students studying on campus are required to have this form signed by an International Student Advisor at Swinburne International before submitting it to their Department office.

International Student Advisor Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Comments: \_\_\_\_\_

Refunds to international students are governed by the International Student Enrolment and Tuition Fee Policy which can be located at <http://ppd.swin.edu.au/stuinf/InternationalStudentEnrolmentAndTuitionFeePolicy.htm>  
 Please note that DIAC will be advised of your withdrawal. With the exception of AusAID students, your visa will remain valid for 28 days from this date.

**NOTICE OF PERMANENT WITHDRAWAL FROM COURSE**

Course Title \_\_\_\_\_ Course Code \_\_\_\_\_

Date Course Commenced \_\_\_\_/\_\_\_\_/\_\_\_\_

SEMESTER FROM WHICH WITHDRAWAL IS TO TAKE EFFECT SEM 1  SEM 2

Main reason for withdrawing (Choose 1)

<input type="checkbox"/> Transferred to another course at Swinburne	Did you receive any course counselling before deciding to withdraw?
<input type="checkbox"/> Enrolling at another institution	YES <input type="checkbox"/> NO <input type="checkbox"/>
<input type="checkbox"/> Got a job	Would you recommend studying at Swinburne?
<input type="checkbox"/> Financial difficulties	YES <input type="checkbox"/> NO <input type="checkbox"/>
<input type="checkbox"/> Personal difficulties	If no, or if you have any other feedback, please add comments here.
<input type="checkbox"/> Timetabling did not suit	_____
<input type="checkbox"/> Study workload too high	_____
<input type="checkbox"/> Course was not interesting	_____
<input type="checkbox"/> Course did not suit the way I prefer to learn	_____
<input type="checkbox"/> Course did not meet my personal and/or employment goals	_____
<input type="checkbox"/> Increased work commitments	_____
<input type="checkbox"/> Other	_____

**CONDITIONS**

**ACCREDITED COURSES**

- Application for refund must be made within a four week period from commencement of classes in the course. The minimum fee will be deducted from all refunds.
- Students who withdraw from a course within four weeks of commencement of classes in order to take place at another tertiary institution will be eligible for a full refund upon confirmation of enrolment at the other tertiary institution.
- The refund is subject to the return of your University I.D. card and any University property or materials you may have in your possession.

SIGNATURE OF STUDENT \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

**APPROVALS – OFFICIAL USE ONLY**

A refund of materials is approved  Yes  No Material fee refund amount \$ \_\_\_\_\_

Department Initiated Withdrawal Signature of Department Manager \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Department \_\_\_\_\_ Start Date of Course \_\_\_\_/\_\_\_\_/\_\_\_\_

**ASCOL Processing Only**

Fees:  Refund Due  Cheque Req Processed DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ Initials \_\_\_\_\_

**PLEASE ATTACH ANY ATTENDANCE CHECK INFORMATION AND RESULTS**