



Enrolment Withdrawal/Cancellation and Refund Request Form

BRIGHTON INSTITUTE OF TECHNOLOGY

CRICOS Provider Code 02552G RTO No 21438
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Email: info@bit.edu.au Website: www.bit.edu.au

1. Student's Personal Details:				
Full Name:				
Student ID:		Last date of study		
Course code and Name:				
Address:				
Email:		Mobile:		
Action Required: Please tick	<input type="checkbox"/> Withdrawal (After course commencement)		<input type="checkbox"/> Cancellation (Before Course Commencement)	
2. Please tick the reason for request:				
<input type="checkbox"/> Medical Reasons	<input type="checkbox"/> Financial Circumstances		<input type="checkbox"/> Transferred to another provider (provide admission documents)	
<input type="checkbox"/> Returning to home country	<input type="checkbox"/> Staff quality inadequate		<input type="checkbox"/> Compassionate and Compelling Reasons	
<input type="checkbox"/> Unsatisfactory Course Experience	<input type="checkbox"/> Transferred to another course within BIT		<input type="checkbox"/> Other	
<p>Please approach the finance department for approval on this application prior to final submission. (Note: No withdrawal will be approved unless all outstanding fees are paid.)</p> <p>International students must state the reason for withdrawing from a course at Brighton Institute of Technology. BIT is obliged to report the withdrawal and the reason to DHA (Department of Home Affairs). All supporting documents should be attached to this form. Please refer to the Refund Policy for any applicable refunds.</p> <p>Additional Comments _____</p> <p>_____</p>				
<p>Do you request the refund of your unused tuition fee <input type="checkbox"/> Yes, please complete Part 3 <input type="checkbox"/> NO, go to Part 4</p>				
3. Reason for Refund Request (indicate at least one):				
<input type="checkbox"/> Visa refused (attach documentary evidence from Department of Home Affairs) <input type="checkbox"/> Withdrawing from course due to compassionate or compelling circumstances <input type="checkbox"/> I am changing education providers and I have a valid Letter of Offer from a new education provider <input type="checkbox"/> I have failed to meet entry requirements / conditions on Letter of Offer <input type="checkbox"/> Withdrawing from course due to academic issues <input type="checkbox"/> Withdrawing from course due to medical reasons <input type="checkbox"/> My enrolment has been cancelled due to a breach of the visa conditions <input type="checkbox"/> Other, please provide details: _____				
4. Student Declaration				
<p>I have been informed and understand that withdrawing from this course might affect my Visa status. I have been informed to contact DHA for any visa related queries.</p>				
Student Signature:			Date:	
Office use Only:				
Request received	Signature		Date	
Finance Approval	Signature		Date	

