APPLICATION FOR WITHDRAWAL

Learner Details			
Given Name		**Surname**	
Address			
Phone		**Mobile**	
Email		**USI Number**	
Date of Birth		**Gender**	☐ Male ☐ Female

Enrolment & Withdrawal Details	
Qualification Code	
Qualification Title	
Fees Paid	$
Fee Payer Name	
Address	
Select one of the following options	☐ Withdrawal from course ☐ Withdrawal from units of study on or before census date (no debt incurred or refund given if payment has been made) ☐ Withdrawal from units of study after census date (no refund given/debt still incurred unless special circumstances apply)
Reason for withdrawal	

Units of Competency (For withdrawal)	
Unit Code	**Unit Title**

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			
Bank Name		**Branch**	
BSB Number		**Account No.**	

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

Learner Name			
Learner Signature		Date	

OFFICE USE ONLY

Received by		Date	
Approved	☐ Yes ☐ No	Refund Amount	$
Withdrawal has been granted for the following units			
Unit Code	**Unit Title**		