

STUDENT DEFERRAL/SUSPENSION/WITHDRAWAL FORM

Complete and sign this Form and forward to GBCA Address: 337 -339 Latrobe Street, Melbourne 3000					
Student Full Name					
Student ID					
Email Address		Mobile Number			
Course Code and Title					
I would like to apply for a: (tick one)					
O Deferment O Suspension O Withdrawal					
From my course.					
DEFERMENT OF COMMENCEMENT OF STUDY					
Start Date					
End Date					
Reason:					
	SUSPENSI	ON OF COURSE			
Start Date					
End Date					
Reason:					
WITHDRAW OF COURSE					
Reason:					
 By signing this declaration, I declare the following is true: I have read, understood and agreed to the terms and conditions of the Global Business College of Australia refund policy as stated in the GBCA Student Information Booklet and GBCA website 					
 I am aware that the suspension of my study may lead to me unable to complete my course within the duration of my CoE. Request for extension of CoE will be charged at \$250 per week. 					
 Any evidence that I attach in this form are true and accurate. 					
Student Signature					
Date					



OFFICE USE			
The application has been	Approved	Not Approved	Cancelled
COMPLIANCE MANAGER PRINTED NAME AND SIGNATURE			
DATE:			
COLLEGE MANAGER PRINTED NAME AND SIGNATURE			
REASON FOR DECISION			
DATE:			