

## International Students Withdrawal and Refund Application Form

Please forward to [studentservices@leculinaire.edu.au](mailto:studentservices@leculinaire.edu.au) , post: 424 Harris Street Ultimo 2007 or hand in to Student Services located on Level 1

### GENERAL INFORMATION

This form is to be completed by **international students** who wish to withdraw from their course of study. Further information can be found in International Student Handbook.

#### COURSE CANCELLATION (NOT YET COMMENCE THEIR COURSE)

1. The cancellation form for students who have not commenced or study their course yet.
2. Students may be or may not be eligible to cancel their course
3. The course cancellation request, it can be considered on the grounds of illness, injury, or compelling personal circumstances.
4. Supporting evidence must be submitted along with this application (the cancellation request will not be assessed if documents are in-complete).
5. If complete document is received, the processing time frame is a minimum of 10 working days

#### COURSE WITHDRAWAL (Enrolled student)

1. Continuing students who wish to withdraw or terminate their enrolment must submit their application before the term has commenced
2. Continuing students may be or may not be eligible to withdraw if students do not complete the first six months of principal CoEs (Enrolled as a package course).
3. The course withdrawal request, can be considered on the grounds of illness, injury, or compelling personal circumstances
4. 100% of next term tuition fee may be required to pay to LHI, please see College Policy and Procedure
5. Supporting evidence must be submitted along with this application (The withdrawal request will not be assessed if documents are in-complete)
6. If complete document is received, the processing time frame is a minimum of 10 working days

**Please note:** Cancellation or withdrawal from an enrolment may affect the student visa granted. LHI will notify the Department of Education and Training, and Department of Home Affairs via PRISMS as required under the ESOS Act 2000.

**Student Personal Information**

Student Full Name:

Student ID Number:

Email Address:

Contact Number:

Course Enrolled:

Course Commencement date :

Course Completion Date :

**Application Details**

**Cancelation/Withdrawal of Enrolment**

Note: Cancelation/Withdrawal of your enrolment will affect your student visa. You must contact the Department of Home Affairs for visa information before submitting this form. Contact DHA by telephone on 131 881 or through their website at [homeaffairs.gov.au/](http://homeaffairs.gov.au/)

**CANCELLATION OF ENROLMENT IS NOT THE SAME AS A RELEASE LETTER.**

**Release Letter**

Attach the following documents

- A valid offer letter showing the intended course(s) and registered provider of transfer.
- A written statement detailing the reasons why you wish to transfer providers and how this transfer will benefit you.
- Evidence of meeting the criteria for transfer between providers described in the International Students Withdrawal, Transfers and Refund Policy.
- If you are under the age of 18, written approval from a parent or legal guardian supporting the transfer.

Note: Your application for release will be assessed in accordance with Le Culinaire Hospitality Institute, International Students Withdrawal, Transfers and Refund Policy.

The outcome of the application will be communicated to the student in writing within **10 business days** from the date the application has been submitted. Please note that if you are granted a release letter, your enrolment will be cancelled.

**Refund of Fees**

Select the preferred payment method for refund Note: If original payment made by credit card, the refund will be only made to the same account, and this option is otherwise not available.

Credit Card Account

Card Number: \_\_\_\_\_ Expiry Date \_\_\_\_\_

Card Holders Name: \_\_\_\_\_

Bank Details

BSB: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Other Payment Details:** \_\_\_\_\_

**Reason (please attach any supporting evidence)**

- Withdraw from Course**   
  **Did not meet entry requirements**   
  **Granted permanent residency visa**  
 **Student Visa Refused**   
  **Enrolment excluded or suspended**   
  **Transferring to another Training Provider**  
 **Other:** \_\_\_\_\_

**Evidence Provided**

Student Declaration	APPROVED REFUND - OFFICE USE ONLY
<p><b>I have carefully read and understand Le Culinaire Hospitality Institute International Students Withdrawal, Transfers and Refund Policy and that any refund of fees will be as per this policy.</b></p> <p>Student's signature: _____</p> <p>Date: _____</p>	<p><b>Total Refund: \$</b> _____</p> <p><b>Refund Processed By:</b> _____</p> <p><b>Date:</b> _____</p> <p><b>Refund Approved by:</b> _____</p> <p style="text-align: right;">CEO/DIRECTOR/PEO</p> <p><b>Date:</b> _____</p>

**OFFICE USE ONLY**

This application has been assessed and approved  OR rejected

<b>Position:</b>		<b>Print Name:</b>
<b>Signature:</b>		<b>Date:</b>

**Comments:**

<b>Participation and results finalised in student management system Reviewed by:</b>	<b>YES or NO</b>
<b>Date of Action:</b>	
<b>Finance Reviewed by:</b>	
<b>Date of Review:</b>	
<b>Evidence Attached Reviewed by:</b>	
<b>Date of Review:</b>	
<b>PRISMS Action by:</b>	<b>Processed Copy on Student File: YES, of NO</b>
<b>Date of Action:</b>	
<b>SMS Review by:</b>	
<b>Date of Review:</b>	
<b>Student notified of outcome:</b>	<b>YES or NO</b>
<b>Date Student Notified:</b>	
<b>Management Name:</b> <b>CEO/PEO/DIRECTOR</b>	
<b>Management Signature:</b>	