

3.19 DEFERRING, SUSPENDING, EXTENDING OR CANCELLING STUDENT ENROLMENT



CRICOS PROVIDER CODE 01751G

INTERNATIONAL STUDENTS PROGRAM
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Tenison Woods College
 PO Box 965
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DEFERMENT-SUSPENSION-EXTENSION-CANCELLATION REVIEW FORM

Date of Review _____

REASON(S)	TICK
Student Request	
Staff Initiated Request	
Other (specify)	

Name of student _____

Section 1 Reason for Review

This review of the student’s course of study is due to:

- | | |
|---|---|
| <input type="checkbox"/> Compassionate circumstances | <input type="checkbox"/> Compelling circumstances |
| <input type="checkbox"/> Student misbehaviour | <input type="checkbox"/> Unsatisfactory course attendance |
| <input type="checkbox"/> Unsatisfactory course progress | <input type="checkbox"/> Other |

Provide a detailed description of the reason chosen above.

Section 2 Supporting Documentation

Has the student provided documentation (eg medical certificate) to support the reason stated in section 1?

- No Yes

If yes, provide details of documentation provided and keep photocopy on student’s file for reference.

If the review is due to student misbehaviour is there support documentation available to substantiate the claimed misbehaviour?

- No Yes

If yes, provide details of documentation provided and keep photocopy on student’s file for reference.

If the review is due to unsatisfactory course attendance / progress does the course schedule accurately reflect this?

- No Yes

If yes, keep photocopy of relevant course schedule on student’s file for reference.

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Section 3 Action to be Taken

Action to be taken:

- Deferment of studies
- Suspension of studies
- Cancellation of studies

Reasons for decision:

- Reason 1
- Reason 2

People to be contacted on the decision taken (*examples only*):

- Student
- Student's guardian
- Department of Immigration and Citizenship
- Homestay / accommodation contact person
- State Training Authority

Who:

When:

Action required by: _____ Signed _____
Principal