



## DEFERMENT, SUSPENSION, LEAVE OF ABSENCE OR CANCELLATION REQUEST FORM

### PART A — TO BE COMPLETED BY STUDENT

#### SECTION 1 — Student Classification & Personal Details

<b>Student Type:</b>	<input type="checkbox"/> Domestic Student <input type="checkbox"/> International Student (ESOS / PRISMS applies)
<b>Student ID:</b>	_____
<b>Full Name:</b>	_____
<b>Date of Birth:</b>	__ / __ / ____
<b>Contact Number:</b>	_____
<b>Email Address:</b>	_____
<b>Course Enrolled:</b>	_____
<b>Australian Address:</b>	_____
<b>International Students Only — Overseas Contact Details</b>	
<b>Overseas Phone Number:</b>	_____
<b>Overseas Email Address:</b>	_____
<b>Overseas Address:</b>	_____

#### SECTION 2 — Type of Request

*QMS Section 11: Deferment and Suspension are only granted on compassionate or compelling grounds. Requests are not granted as a matter of routine convenience.*

	Request Type	From Date	To Date
<input type="checkbox"/>	<b>DEFER</b> my enrolment <i>(Before course commencement — max. 6 months)</i>	__ / __ / ____	__ / __ / ____
<input type="checkbox"/>	<b>SUSPEND</b> my enrolment <i>(After commencement — max. 12 months)</i>	__ / __ / ____	__ / __ / ____
<input type="checkbox"/>	<b>LEAVE OF ABSENCE</b> from my enrolment <i>(Duration as agreed with Student Administration)</i>	__ / __ / ____	__ / __ / ____
<input type="checkbox"/>	<b>CANCEL</b> my enrolment of course: _____	__ / __ / ____	N/A

#### SECTION 3 — Reason for Request & Compassionate / Compelling Circumstances



*QMS 11.1: Deferment and Suspension are only approved where compassionate or compelling circumstances exist. Tick the most relevant category, then provide full details below.*

**Reason category (tick the most applicable):**

- Serious illness or injury (medical certificate required)     Bereavement of close family member (death certificate required)
- Major political upheaval / natural disaster in home country     Traumatic experience (police / psychologist report required)
- Visa processing delay preventing commencement     WEI unable to deliver prerequisite unit
- Financial hardship (supporting documentation required)     Other (specify below)

**Full details of your reason (please be specific — this information is used in the assessment decision):**

## SECTION 4 — Supporting Evidence Checklist

*QMS 11.1 / QMS Evidence Framework: Decisions are evidence-based. All evidence must be original or certified copies. Insufficient evidence may result in rejection of your application.*

**Please tick all evidence types you are attaching:**

- Medical certificate or doctor's letter (illness/injury)     Death certificate or funeral notice (bereavement)
- Police report or psychologist's letter (trauma)     Statutory declaration (where documentary evidence not available)
- Visa documentation / DHA correspondence (visa issues)     Evidence of natural disaster / government advisory
- Financial hardship evidence (bank statements / letter)     Other: \_\_\_\_\_

**Evidence sufficiency self-assessment:** Has the evidence been certified or signed by a qualified person?  Yes  No  
Is the evidence current (dated within last 6 months)?  Yes  No  N/A

## SECTION 5 — Request-Specific Acknowledgements

### Deferment (tick if applying for Deferment)

- I understand that my course start date cannot be deferred for longer than **six (6) months**.
- I understand a revised Confirmation of Enrolment (CoE) will be issued if approved (International Students).

### Suspension (tick if applying for Suspension)

- I understand that my enrolment cannot be suspended for longer than **twelve (12) months**.
- I understand that re-entry must align with a course intake period and I will contact Student Administration prior to return.
- I understand a revised CoE may be required for International Students.

### Cancellation (tick if applying for Cancellation)



I have read the Refund Policy and understand that financial penalties may apply.

**International Students:** I understand that cancellation of my enrolment will result in cancellation of my CoE and will affect my student visa. I will contact the Department of Home Affairs (DHA) within **28 days**. See: [homeaffairs.gov.au](http://homeaffairs.gov.au)

## SECTION 6 — Student Declaration & Appeal Rights

**I hereby declare that (please tick each box to confirm):**

The information provided in this form is correct and complete to the best of my knowledge.

I am aware that my deferral, suspension or cancellation may affect my student visa status, and I have been advised to contact DHA.

I have been provided access to the relevant Policies and Procedures, including the Cancellation Policy and Fees and Refund Policy.

**APPEAL RIGHTS:** I understand that if my application is rejected, I have the right to access WEI's Complaints and Appeals process (QMS Section 13) within **20 working days** of the written decision.

**INTERNATIONAL STUDENTS:** I understand that WEI is required to report deferments or suspensions of 14 days or more to the Department of Home Affairs (DHA) via PRISMS under Section 19 of the ESOS Act.

<b>Student Name (Print):</b> _____	<b>Date:</b> ___ / ___ / _____
<b>Signature:</b> _____	<b>Student ID:</b> _____



**PART B — OFFICE USE ONLY (Staff Only — Do Not Write in This Section)**

**1. RECEIPT & ASSIGNMENT**

<b>Case / Reference No:</b> _____	<b>Date Received:</b> __ / __ / ____	<b>Received By:</b> _____
<b>Assigned To:</b> _____	<b>Target Decision Date:</b> __ / __ / ____	<b>Student Type:</b> <input type="checkbox"/> Domestic <input type="checkbox"/> International

**2. FINANCIAL & ELIGIBILITY CHECK**

<b>Fees paid up to date?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No — Action required: _____
<b>Student Code of Conduct breach?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes — Note: _____
<b>Reviewed by (Accounts/Admin):</b>	_____

**3. COMPASSIONATE & COMPELLING CIRCUMSTANCES ASSESSMENT (QMS 11.1 / 11.2)**

Do the circumstances meet the QMS definition of compassionate or compelling grounds?  Yes  No

Evidence assessed as:  Sufficient  Insufficient  Partially sufficient

CEO consulted for complex case?  Yes  No  N/A

Assessment notes:

**4. DECISION (QMS 11.2 — within 3 working days of receipt)**

Decision:  APPROVED  REJECTED

<b>Decision Date:</b> __ / __ / ____	<b>Decision Made By:</b> _____
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If APPROVED — Approved period:

From: \_\_ / \_\_ / \_\_\_\_ to \_\_ / \_\_ / \_\_\_\_

Revised CoE required?  Yes — issue new CoE  No  N/A (Domestic)

If REJECTED — Reason for rejection:

**5. STUDENT NOTIFICATION (QMS 11.2 — written notification within 3 working days)**



**Student notified in writing?**  Yes  No

**Date of written notification:** \_\_\_ / \_\_\_ / \_\_\_\_

**Method:**  Email  Letter  In person — copy retained on file

**For REJECTIONS — Appeal rights communicated to student?**  Yes  No

*The student must be advised in writing of their right to access the Complaints and Appeals process within 20 working days of a rejection decision.*

## 6. PRISMS & CoE MANAGEMENT (International Students Only — ESOS Act s.19 / National Code Standard 9)

**Is student an International Student?**  Yes — complete this section  No — skip this section

### PRISMS reporting required?

*Required if approved deferment or suspension is 14 days or more, or cancellation of enrolment.*

Yes — PRISMS updated  No — duration < 14 days, no reporting required

### PRISMS update details:

Date PRISMS updated: \_\_\_ / \_\_\_ / \_\_\_\_ Updated by: \_\_\_\_\_

PRISMS transaction / reference number: \_\_\_\_\_

### CoE Action Required:

CoE cancelled  Revised CoE issued  No CoE change required

New CoE number (if issued): \_\_\_\_\_

Date CoE action completed: \_\_\_ / \_\_\_ / \_\_\_\_ Actioned by: \_\_\_\_\_

**Student advised to contact DHA (Department of Home Affairs)?**  Yes  No  N/A

*For cancellations, student must contact DHA within 28 days with relevant documentation.*

## 7. CONTINUOUS IMPROVEMENT LINKAGE (QMS Section 14 / Outcome Standard 4)

**Does this case identify a systemic issue or improvement opportunity?**  Yes  No

**If Yes — CI action description:**

\_\_\_\_\_

**Recorded in CI Register?**  Yes  No

**CI Register Reference No:** \_\_\_\_\_

## 8. AUTHORISING OFFICER SIGN-OFF

**Name (Print):**

\_\_\_\_\_

**Position:**

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

**Date:**

\_\_\_ / \_\_\_ / \_\_\_\_

*This form must be retained securely for a minimum of 5 years. For international students, PRISMS records must also be maintained in accordance with the ESOS Act 2000 and the Privacy Act 1988.*