

DEFERRAL, SUSPENSION, WITHDRAWAL AND TRANSFER FORM

1. STUDENT DETAILS							
Name:			Stu	udent ID:			
Email:				Mobile:			
Current Course:				Intake:			
2. CHANGE DETAILS (tic	2. CHANGE DETAILS (tick and provide the relevant details as required)						
I wish to Defer my course in which I am currently enrolled. (I understand deferrals are subject to course availability.)							
Initial Start Date:		Desired Start Date:					
Deferral Reason:							
Deferrals only applicable at least one week before course commencement.							
I wish to Suspend my enrolment to another course date. (I understand the Suspension will be subject to course availability.)							
From Date:		To Date:					
Suspension Reason:							
	Suspensions only applica	able after course commen	cement.				
I wish to Withdraw	my enrolment from this course. (A	Please provide necessary s	supporting d	locuments a	rs evidence.)		
Withdrawal Reason:							
Withdrawals are subject to approval by Pioneer Management (CEO / PEO).							
I wish to Transfer to another course. (I Understand there may be further fees involved.)							
From Course:		To Course:					
From Intake:		To Intake:					
Transfer Reason:							
Transfers are subject to approval by Pioneer Management (CEO / PEO).							
Student's Signature:			Date:				

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Version: 3.4	Approved: 19 July 2024	Review Date: 19 July 2025	Page 1 of 3



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3. OFFICE USE ONLY					
Reason for Approv	al / Decline:				
	Decision:		APPROVED	DECLINED	
Signature:			Management Name and Position:		
Updated on aXelerate: Emailed:					
Processed by:			Date Processed:		

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