

REQUEST FOR DEFERMENT OF STUDIES



PURPOSE

This form is to request a deferral from studies from the qualification which you are currently enrolled. A deferral is a temporary suspension/postponement of your enrolment. Before proceeding with your request to defer your studies (temporarily suspend your enrolment), ACCCO strongly advises you to seek advice from your employer on whether deferring your study will affect your eligibility for employment, or the current role (position) you may hold within an education and care profession

SUBMITTING THE REQUEST TO DEFER YOUR STUDIES

Please forward your completed *Request for Deferral of Studies* form to your nominated Trainer Assessor.

PERSONAL DETAILS

Student name			
Postal address			
Date of Birth		USI	

QUALIFICATION

Qualification currently studying	
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MODE OF STUDY

<input type="checkbox"/> Apprenticeship/Traineeship*	<input type="checkbox"/> External	<input type="checkbox"/> Classroom	<input type="checkbox"/> International
<i>* If you are a Trainee or Apprentice, you will need to contact your Trainer Assessor to formally suspend your traineeship/apprenticeship contract. Consent will be required from your employer.</i>			

LENGTH OF DEFERRAL

What is the length of time you wish to defer from your study?	
How many units do you have left to complete?	

COMPLETION DATE

What is your current end date?	Date:
What date do you intend to resume your study?	Date:

REASON FOR DEFERRAL

Please provide a brief explanation of why you wish to defer from your study.

STUDENT DECLARATION

- ✓ I understand that this form does not automatically guarantee that a deferral from my studies will be granted.
- ✓ I understand that once I have deferred from study that I will no longer be classified as 'actively working towards my qualification' which could potentially impact my employment within the education and care industry.
- ✓ I understand that during my absence from studies the Training Package may be updated which means that upon my return to study, I may be required to participate in further gap training and assessment due to units being superseded.
- ✓ I understand that ACCCO will only grant a maximum deferral time frame of 6 months.
- ✓ I understand that my enrolment period will be extended to incorporate the deferral period.

Student name			
Student Signature		Date	