



Application to Withdraw Form

Student Name: _____

Student ID: _____

Date of Withdrawal: ____ / ____ / ____

Course: _____

I wish to withdraw from the course I am enrolled in with VACTS. I wish to withdraw for the following reason/s:

I have discussed the reasons for withdrawal from the course with ☐ Yes ☐ No

Note that you are required to meet with Student Welfare Officer prior to submission of this form.

Have your contact details changed since you last advised us of them? ☐ Yes ☐ No If yes, please provide below.

Home Address: _____

Suburb: _____

Postcode: _____

Tel (Home): _____

Tel (Work): _____

Mobile: _____

Email: _____

Student

Parent/Legal Guardian

(only required for students under 18)

Signed: _____

Signed: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

Please forward this completed form to our office. Upon receipt of this form, you will be withdrawn.

Once your withdrawal has been processed, you will be issued with a statement of attainment for any competencies you have achieved. This statement cannot be provided until all outstanding fees have been paid. If competencies have not been attained, no further notification of withdrawal will be provided by VACTS unless specifically requested.

Your application for withdrawal may result in fees being refunded to you as per VACTS Fees, Charges and Refund Policy.