

Application Form - Deferment and Suspension

Global Healthcare Management College Pty Ltd The Trustee for GHMC Trust (herein referred to as "GHMC")

Student's Personal Details										
Full Name:										
Student ID:										
Course Code & Name:										
Address: Post Code:										
Phone no:										
Email ID:										
Request for: (Please tick the following)										
• Deferment	From:	Till:	Last day of study: (If have any)							
• Suspension	From:	Till:	Last day of study: (If have any)							
Please tick the reason fo	or the request.									
□ Medical Grounds	□ Compelling/compa	□ Compelling/compassionate Reasons □ Future intake Date								
□ Visa Cancellation	□ Others; Please spec	□ Others; Please specify								
Please mention the reason in detail:										



International students must state the reason and provide documentation for deferring/suspending their studies as <i>GHMC is</i> required to notify this information to the Department of Home Affairs (DHA) via PRISMS.									
Documents attached:									
□ Medical Certificate □ Travel Documents □ Ma	ils □ Supporting Certificates □ Copy of visa cancellation								
□ Others; please specify	-								
Points to be noted:									
	be accessed after all the supporting documents and evidence								
has been provided.Please note that the Institute will grant a deferral or suspension of your studies only if there are compelling and									
compassionate circumstances and the evidence for the same has been provided. • Students are advised to seek advice from the Department of Home Affairs on the potential impact on their									
student visa due to deferment, suspension or cancellation.									
• In case where deferment or suspension has not been granted, students are required to attend their classes at <i>GHMC as</i> per their course schedule. Failure to do so may be seen as abandoning studies and students may be reported to the Department of Home Affairs.									
• Students have the right to appeal through GHMC's	s complaints and appeals process, in accordance with standard								
cancellation will not take effect until the interna	e 2018, within 20 working days. The deferment, suspension or l appeals process is completed, unless the overseas student's								
health or well-being, or the well-being of others, is	s likely to be at risk. e a valid deferment or suspension because abandoning their								
studies might lead to cancellation of your visa and yo									
Student's Declaration:									
I understand that suspension or deferral may result in an extension of my course duration and an extended CoE. I also understand that deferment/suspension may affect my student visa and I need to seek advice from the Department of Home Affairs (DHA) on the potential impact on my student visa.									
☐ I have been advised of all the relevant consequences of the outcome of my request.									
$\hfill\Box$ I have been advised of all the relevant information in relation to the request made on this form.									
☐ I am aware of my right to appeal.									
Student Signature:	Date:								



OFFICE USE ONLY:								
OFFICE USE UNLI:								
Authorized person approval	Name							
	Signature		D	ate:				
	□ Gra	nted						
Decision of Request	□ Not	Granted						
Course Adjustment (If required):								