

International Request for Release Letter Form



This form is to be used:

- if you wish to withdraw from the course in which you are currently enrolled and you wish to transfer to another provider and
- you have not completed six months of your principal course at Box Hill Institute

Information:

Release letters will be provided in accordance with Box Hill Institute's Transfer Request Policy and Procedure. You should read the policy carefully to establish your eligibility for a release letter. **Any request for a release letter must be made in writing. Documents that you must attach to this request before your application for a release will be considered are:**

- Letter of offer from the Institute to which you wish to transfer
- Evidence of compassionate or compelling circumstances
- Application for refund (if applicable)
- Written support from company/government sponsor (for company/government sponsored students)

Note: Any incomplete request will not be processed by International.

Student to complete:			
Student ID no.			
Family name <i>(as per passport)</i>			
Given names <i>(as per passport)</i>			
Date of birth (dd/mm/yyyy)			
Address			
Suburb		Postcode:	
Telephone	Home		Mobile
Email			
COURSE NAME: <i>(please state the name of courses)</i>			
Declaration I understand that: <ul style="list-style-type: none"> • this is an application for a release and the application will be considered in accordance with the Institute's Transfer Request Policy • I will be informed of the outcome of this request including the reasons for the outcome • I have a right of appeal • If the release is approved, all my Electronic Confirmation of Enrolment (eCoE) with Box Hill Institute will be cancelled and • The Department of Immigration and Border Protection (DIBP) will be informed of my transfer • If I choose to return to Box Hill Institute I will have to reapply for admission • If applicable, my entitlement to a refund will be assessed in accordance with Box Hill Institute's Refund Policy for International Students 			
Signature			Date / /

Office Use Only		
Please note that all evidence of document/s must be sighted and stamped as "Originals Docs Sighted" and the correct date. Please state your name on the evidence of document/s.		
Received by International Officer/s Name		Date / /
Outcome	<input type="checkbox"/> Approved	<input type="checkbox"/> Not approved
<input type="checkbox"/> No release letter required		
Reason/s not approved (if applicable)		
Executive Manager or Nominee, International Signature		Date / /
Action required	International Officer/s	Date
<input type="checkbox"/> PRISMS - eCoE cancelled		/ /
<input type="checkbox"/> Teaching Centre Advised		/ /
<input type="checkbox"/> Refund processed (if applicable)		/ /
<input type="checkbox"/> Database updated		/ /
<input type="checkbox"/> Invoice cancelled (if applicable)		/ /
<input type="checkbox"/> File closed		/ /