

F.18.08 RELEASE LETTER REQUEST FORM

STUDENT DETAILS

STUDENT NAME:	
STUDENT ID NUMBER:	GROUP NUMBER:
DATE OF BIRTH:	PHONE NUMBER:
ADDRESS:	

COURSE DETAILS

COURSE NAME:
COURSE START DATE:

PLEASE SPECIFY YOUR REASONS FOR LEAVING AVETA:

NOTE TO THE STUDENT:

- A Letter of Release will be provided to you at no cost
- You should contact DIBP regarding any potential changes to your Visa and that there is a possibility that a new student Visa may be required
- The Letter of Release will be issued to you within 10 working days of submitting this form
- You should refer to AVETA's Refund Policy for any relevant refund information

STUDENT SIGNATURE:	DATE:
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OFFICE USE ONLY

RECEIVED BY:	DATE:
SUPPORTING DOCUMENTATION ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Request Assessment	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED
If not approved please provide a brief description as to why the request has not been granted:	
REQUEST ASSESSED BY:	
SIGNATURE:	DATE:

LETTER OF RELEASE GENERATED BY:	
SIGNATURE:	DATE: