

NOTIFICATION OF DISCONTINUATION



UNIVERSITY OF
CANBERRA

AUSTRALIA'S CAPITAL UNIVERSITY

Only complete this form if you want to cease studying at the University of Canberra.

International Students must see an International Student Advisor (ISA). Appointments can be made online at: <http://www.canberra.edu.au/isa> or email International.Student@canberra.edu.au The ISA Office is located in the Student Centre.

Please note: If you have incurred fee charges for the semester and would like to apply for a **remission** of your fees please complete the Enrolment Amendment form .

<http://www.canberra.edu.au/student-services/forms>.

For help completing the Enrolment Amendment form please go to AskUC:

<http://www.canberra.edu.au/askuc>, then go to **FAQs - Enrolments and Fees - The refund Policy**.

Personal Information

Student ID No.	Family Name or Surname	Given Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Course Code	Course Name	
<input type="text"/>	<input type="text"/>	

Before signing this form please refer to the information on the ASKUC website:

<http://www.canberra.edu.au/askuc> - **FAQs - Enrolments and Fees - Alternative Options for Discontinuing Students**

Please note: Your UC student email account is active for life. Access to MyUC and Moodle will be terminated upon discontinuation.

Student's Signature	Date	Contact Phone Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email: u _____ @uni.canberra.edu.au

Note: Your discontinuation confirmation will be sent to your student email account.

Address:

Suburb:	Postcode:	State:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of Discontinuation (please tick one)

I wish to discontinue: Today End of Semester one End of Winter term End of Semester two

Reason for Discontinuation (please tick one)

Dissatisfaction with course Financial Health Study difficulties
 Employment Transferring to another institution Personal

Office use only

Date processed:

Administration Officer:

Signature: _____ Date: _____ Staff ID Number: _____

Australia Government Higher Education Provider Number 00212K

Personal information collected by the University is subject to the Commonwealth *Privacy Act 1988*

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