

APPLICATION FOR DEFERRAL OF OFFER

(For new students with an offer of a place)



You may apply to defer your offer of a place for up to one year. (Deferrals for a period greater than one year may be granted only if there are exceptional circumstances.)

Student Number: _____

Family Name: _____ Given Names: _____

Address: _____

State: _____ Post Code: _____ Email: _____

Contact phone number _____

Course Code & Title: (eg R3A Bachelor of Arts) _____

When do you intend to defer your enrolment to: Semester _____ Year _____

Reason for Deferral: (please tick) – *please note that your application cannot be approved if there is no reason supplied*

- | | |
|---|--|
| <input type="checkbox"/> [a] Travel Interstate/Overseas | <input type="checkbox"/> [d] Gap Year |
| <input type="checkbox"/> [b] Work commitments | <input type="checkbox"/> [e] Financial |
| <input type="checkbox"/> [c] Medical | <input type="checkbox"/> [f] Family |
| <input type="checkbox"/> [g] Other (please indicate reason below) | |

If your deferral is **not** approved, do you wish to be withdrawn from any units you are enrolled in? YES / NO

If your deferral is approved, we will withdraw you automatically.

Signature: _____ Date: _____

OFFICE USE ONLY (ADMISSIONS OFFICE)

Withdrawn from units: _____ Student Advised: _____

Comment recorded on USRS _____

**Please return this form to:
Admissions Office, Student Centre, Private Bag 45, Hobart TAS 7001**