



TEQSA Provider ID	PRV14320
CRICOS Registration No:	TBA
BBus CIRCOS Course Code:	TBA

Please read the **AHE Overseas Students Deferral, Suspension and Cancellation Policy and Procedure**  
before completing this Form

Student Name			Student Number	
Current address		Current contact details	Home:	
			Mobile:	
Email				
Emergency Contact Name & Number	We need these details in case if we are unable to contact you during your deferral or suspension			
Course Enrolled Currently	Bachelor of Business			
Defer/Suspend	<input type="checkbox"/> Defer my course to next available intake <input type="checkbox"/> Suspend my current course from ..... to .....			
Reason for deferral/suspension				
Supporting evidence	<input type="checkbox"/> Medical certificates <input type="checkbox"/> flight ticket <input type="checkbox"/> visa delay evidence other.....			

#### Student Declaration

- 1) I have read the **AHE Overseas Students Deferral, Suspension and Cancellation Policy and Procedure**.
- 2) I understand and agree to conditions of the **AHE Overseas Students Deferral, Suspension and Cancellation Policy and Procedure**.
- 3) I am fully aware that the Department of Home Affairs and any relevant immigration department will be informed and my student visa may be affected.
- 4) I have provided supporting evidence to justify my reasons for deferral/suspension.
- 5) I must settle any outstanding tuition fees which fall due before suspension.
- 6) I will inform the Student Services Officer if I wish to change the period of my suspension or if there are any changes to my deferral terms/ dates.
- 7) My enrolment may be cancelled if I fail to resume studies immediately after the suspension end date.
- 8) My enrolment may be cancelled if I provide false or misleading information.
- 9) The Department of Home Affairs and any relevant immigration department has the discretionary power to cancel the student visa if I have gained approval for deferral/suspension using false or misleading information/evidence.

**Student Signature**.....**Date:** ...../...../.....

Please submit this completed Form and attached documentation to the AHE administration via email  
([studentstupport1@ah.edu.au](mailto:studentstupport1@ah.edu.au) TBA) or in person at Reception.

Office Use Only	
<input type="checkbox"/> Approved <input type="checkbox"/> Attached appropriate evidence <input type="checkbox"/> Current course finish date effected <input type="checkbox"/> Yes Current course new finish date:..... <input type="checkbox"/> No <input type="checkbox"/> Future course dates effected <input type="checkbox"/> Yes new dates:..... <input type="checkbox"/> No <input type="checkbox"/> Added defer record and changed course dates – processed by:..... <input type="checkbox"/> Student payments settled – Processed by:..... <input type="checkbox"/> Updated SCV in PRISMS – Processed by:.....	<input type="checkbox"/> Not approved Inform student
Comments	

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