## **BARKLY INTERNATIONAL COLLEGE**



CRICOS PROVIDER NUMBER 03136D (VIC) RTO PROVIDER NUMBER 22238

## F.50V03 Enrolment Suspension Form

STUDENT DETAILS			
Full Name:		Stude	nt ID:
Date of Birth:	Phone:	Email:	:
Course:			
Suspension Period:			
From Date:  Please refer to the relevant Deferr	To Date:		o. of weeks:
Reason for Suspension			
Suspension initiated by <u>Studen</u>	<u>nt</u> :		
Medical Grounds	Compassionate/Comp	elling Reason	Exceptional Reason
Please provide details of the re	eason for which you are	requesting a suspe	ension:
Suspension initiated by Admin	istration Office:		
Breach of Student Code of	of Behaviour <i>(Please give</i>	e details below)	
Name of Administration Office	r initiating the Suspensic	on:	
Admin. Officer Signature:			Date:
Student Signature:		Date:	
	ort this information to the I	DHA. Although Barkly	pending their studies as Barkly y International College may approve to contact DHA regarding any visa
Office Use Only			
Received By:		Date Recei	ved:
Suspension Approved: Y	es No, reason:		
Is the end date of the enrolme	ent affected by this decis	ion? No	Yes, New End Date:
PRISMS Updated Vett	rak Updated 🔲 Agent/S	Student Notified by	y email Trainer notified by e
Application Processed By:	Sigr	ned:	Date:
Document Information			

Title:	F.50V03 Enrolment Suspension Form	Version No:	V2.0
Reviewer:	Administration	Date Created:	1 February 2018
Address:	Level 1, 377 Lonsdale Street, Melbourne VIC 3000	Date Reviewed:	30 May 2024