

OFFICE USE ONLY

Officer Initial:

Date:



Notice of Leaving Education Provider

INSTRUCTIONS (PLEASE TICK)

Please complete all the sections below.

I have been enrolled with Macquarie University for:

- More than 6 months
- Less than 6 months. **Do not withdraw** from your program until you have spoken to a Student Adviser. You are required to complete a Letter of Release (Refer to the Application for a Letter of Release for more information).
- I have withdrawn from my units through estudent/ or am a Master of Accounting student and have withdrawn through my department.
- I have read Macquarie City Campus Refund Policy. For a copy of this policy go to - <http://www.city.mq.edu.au/PDFs/2009%20International%20Student%20Fee%20and%20Refund%20Policy.pdf>

Within 2 weeks of receiving this form, Macquarie City Campus will notify DIAC that you will not commence your study. This action will lead to cancellation of your Confirmation of Enrolment (CoE). If you wish to return to Macquarie City Campus after this, you must re-apply <http://www.city.mq.edu.au/apply.html>.

PERSONAL DETAILS

Student No.: _____ Course Name: _____

Family Name: _____ Other Names: _____

Current Postal - Address No. and Street: _____

Suburb: _____ State: _____ Postcode: _____

Email address: _____ Phone Number: _____

Are you sponsored or receive a Government Loan? (Yes / No)

REASON FOR LEAVING (PLEASE TICK)

- Not meeting entry requirement
- Returning to home country and not continuing study in Australia.
(Please provide a copy of air ticket)
Date of departure: _____
- Transferring to another Education Institution. **A copy of your Offer Letter from the other institution must be attached.**

STUDENT SIGNATURE

Student Signature: _____

Date: _____

PLEASE RETURN THIS FORM TO

Macquarie City Campus
Level 2
11 York Street
Sydney New South Wales 2000
Macquarie University
CRICOS Provider No. 00002J