



The University of Sydney Preparation Programs

CHANGE OF ENROLMENT Suspension Form

Extra conditions to return:

Note entered in SG:

Student to complete	
Family name (as shown in the passport):	
Given name(s) (as shown in the passport):	
Student number:	Date of birth:
Current (NSW) address:	
Email address:	Mobile phone:
Current USPP Course:	
Future USPP course:	
New Degree choice at the University of Sydney. Please refer to Change of Study Program Request Form attached: _____	
I am applying for Suspension from _____, returning on _____ (insert dates)	
Please select one of the following reasons:	
<input type="checkbox"/> Personal / medical / health reasons	
<input type="checkbox"/> Family health issues	
<input type="checkbox"/> Other (Provide details in the written parental permission):	
I have provided the following supporting documents* with my application:	
<input type="checkbox"/> Medical certificate (if applicable)	
<input type="checkbox"/> Air ticket (required for student visa holders who are not changing to a different provider and who are leaving the country)	
<input type="checkbox"/> Written parental permission (required for students under 18 years old)	
<ul style="list-style-type: none"> * Your application will NOT be processed if required documents are not provided. Documents can be emailed to studenthelp@studygroup.com 	
Student declaration	
<input type="checkbox"/> I understand that the suspension of enrolment may affect my current visa.	
<input type="checkbox"/> I am giving written consent to The University of Sydney and the College to check my visa status and conditions in VEVO, the Visa Entitlement Verification Online system provided by the Department of Home Affairs (DHA)	
Student's signature _____ Date: _____	

OFFICE USE ONLY					
Bursar/Associate Bursar to complete			BID: _____		
Fees paid:		Fees due/overdue:			
Comments: 					
Bursar's signature _____			Date: _____		
Accommodation Coordinator to complete					
Student living in Homestay/Student accommodation: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete below.					
<input type="checkbox"/> Completed homestay move out procedure		Student move out date: ____ / ____ / ____			
<input type="checkbox"/> Completed student accommodation move out procedure		Student flying out date: ____ / ____ / ____			
<input type="checkbox"/> Others (please specify): _____		If student under 18: Caregiver was informed on: ____ / ____ / ____ Parents/legal guardian were informed on: _____			
Accommodation Coordinator signature: _____			Date: _____		
Assistant Director Student Experience to complete					
Attendance:		Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>		NEC issued <input type="checkbox"/> Date: _____	
Academic progress:		Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/>		NEC issued <input type="checkbox"/> Date: _____	
Do you support this student's application? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Tick the following if received:			Subject selection for:		
<input type="checkbox"/> Reasonable proof to support compassionate or compelling circumstances			Intake _____ Starting on _____		
<input type="checkbox"/> Air ticket (sighted) - flying out on: _____			1.		
<input type="checkbox"/> Written parental permission			2.		
			3.		
			4.		
			5.		
Comments: 					
Last day at the College: ____ / ____ / ____			Assistant Director Student Experience signature: _____		
Date: ____ / ____ / ____					
Suspension to take effect on: ____ / ____ / ____					
College Director to complete					
Has the student attended 6 months of the academic course?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Are there exceptional circumstances?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Is the student being suspended for misconduct?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Refund due?		As per refund policy <input type="checkbox"/>		No <input type="checkbox"/>	
Comments: 					
Application approved: Yes <input type="checkbox"/> No <input type="checkbox"/>					
College Director's signature: _____			Date: ____ / ____ / ____		
OFFICE USE ONLY					
Office staff	Comment			Signature	Date
Library	Books returned	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	Fines paid	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

Bursar/ Assistant Bursar	Locker tidy and returned	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	SG fees reallocation	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Administration	SG course amended	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	Revised Offers emailed to student	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	SCV - PRISMS eCoE Suspension (if under 18, CAAW cancelled)	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	Generated new eCoE (if under 18, and CAAW)	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	Confirmed on VEVO that student is offshore as per flight details	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	Emailed Student Support Team to remove student from attendance list	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	(if under 18) Confirmed with Student Support Team that student is with parents	Yes <input type="checkbox"/>	No <input type="checkbox"/>		