

RELEASE LETTER APPLICATION FORM

This form is to be completed by International Students wishing to withdraw from their current Chambers School of Business ("the School") course and/or applying to transfer to another Registered Training Provider prior to the completion of six months of the 'Principal Course' for which their current Student Visa was granted.

Please note

- The processing time for Release Letter Application is 10 working days from the date of receipt of completed application with required evidence.
- Release letters will be provided in accordance with the School's International Student Transfer between Registered Providers Policy and Procedure
- Students should read the International Student Transfer Between Registered Providers Policy and Procedure carefully to establish their eligibility for a release letter
- Request for a release letter must be made in writing using this form
- For an application for a Release Letter to be considered, students must complete all the sections below and attach required documents listed below and that are relevant to this application:
 - Valid Letter of Offer from another register provider;
 - Evidence of compassionate or compelling circumstances;
 - Application of Refund (if applicable).



Personal Details								
Title: Mr. 🗖 Mrs. 📕 Ms. 📕								
Given Name:			Family Name:					
Date of Birth								
Address Line 1:								
Address Line 2:								
Suburb:	State:	Postcode:						
Email: M); ;						
Student ID No:		Enrolled Code and Nan						

Details of Application for Release

Student Declaration

Chambers School of Business Level 04, 79 George Street, Parramatta NSW 2150 Ph: +61 2 8820 0205 Email: studentsupport@csb.edu.au ABN: 45 626 918 189 RTO ID: 45629 I CRICOS Code: 03867B September 2022 Release letter Application Form



I understand that:

- the information provided in this form is true and correct;
- I have read and understand the School's policy in relation to transfer to another registered provider;
- This is an application for release from my current enrolled course and the application will be considered in accordance with the School's International Student Transfer between Registered Providers Procedure;
- I will be informed of the outcome of this request in writing including the reasons for the outcome;
- I have read and understood the School's Complaints and Appeals Policy and Procedure;
- If my application for a release letter is approved, my current electronic Confirmation of Enrolment (eCoE) will be cancelled and the Department of Home Affairs (DHA) will be informed of my provider transfer;
- If the release letter is approved, I understand that I must contact DHA and seek advice as to whether a new student visa is required;
- After the issuance of a Letter of Release, if I chose to return to the School for enrolment; I will have to reapply for admission;
- If applicable, my entitlement to a refund will be assessed in accordance with the School's Refund Policy and Procedure.

Signature _____

Date _____



Office Use Only								
Please note that all evidence of document/s must be sighted and stamped as "Original Documents								
Sighted". Please state your name on the evidence of documents/s.								
Application Received by								
Name				Date:	7	/ 20		
					,	,		
Outcomo	the Amproved	Chlot Approved	^A Ne rela	aca lattar rae	u irod			
Outcome.	Approved	Oot Approved	~NO Telea		lanea			
Reason/s no	t approved: (if ap	plicable)						
••••••				•••••				
Name								
Name								
C				Data	,			
Signature:				Date:	/	/		
Action requi	red:							
PRISMS - eCOE cancelled								
Refund processed (if applicable)								