

STUDENT WITHDRAWAL FORM

STUDENT DETAILS

Student Name:		
Student Number (If known):		
Trainer:		
Course Code and Title:		
Course Commencement Date:		
Course Location:	UVIC QLD SA NSW	
Course Withdrawal By:	□ Student Choice (complete Section A) □ InterCare Training Decision – Training/Retention Team (Complete Section B), Email to retention@intercaretraining.com.au	

INSTRUCTIONS:

- If you wish to withdraw from your course:
 - o please complete this form and return it to InterCare Training to begin the withdrawal process.
- In order to receive a Certificate or Statement of Attainment, you need to:
 - o Complete and be found Satisfactory in ALL assessments linked to each unit of your course,
 - Complete 120 hours of work placement (where applicable) and be found Satisfactory in your workplace assessment.
 - o Be deemed Competent in all units.
 - o Ensure all outstanding fees have been paid.
 - We will discontinue your training immediately upon receipt of this form.
- A Certificate or Statement of attainment will only be issued for units deemed Competent (including First Aid/CPR units) within 30 days of processing the final assessment(s).
- You will be reported as withdrawn from the course within 60 days (or the State Funding Contract expiry date, if sooner) of this form being processed by InterCare Training.

Important Notice:

A withdrawal from a Government-funded course may have an impact on your future government-funding opportunities, depending on the State funding contract and eligibility criteria at the time of application.

File Name:	D-STU002 Student Withdrawal Form			Version:	2.0
Prepared by:	Integrity Manager	Review Date:	December 2023	Version Date:	March 2023
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SECTION A: WITHDRAWA	AL BY STUDENT CHOICE (OFFICIAL WI	THDRAW	AL)
☐ I have been consulted and from my course.	offered additional support to assist with my stud	ies, howeve	er I still choose to withdraw
Reason for Withdrawal			
Acknowledgement of Ter	ms and Conditions of Withdrawal		
	ake up to 30 days to be withdrawn from my cou		
☐ I understand that future gove	ernment-funding opportunities may no longer b	e available	to me after withdrawal.
Student Signature		Date	
Manager Signature		Date	
SECTION B: WITHDRAWA	L BY INTERCARE DECISION (APPAREI	NT WITHD	RAWAL)
For Office Use only			
Reason for withdrawal:			
□ Non-satisfactory course prog	gress.		
□ Non-attendance of classes.			
□ Non-attendance of placeme	ent.		
□ Non-attendance or non-cor	npletion of FSK bridging courses (South Australia	a Students c	only)
□ Non-payment of fees.			
☐ Other (Please provide detail	s below)		
L			
Retentions Officer Signature		Date	
Manager Signature		Date	

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