



WITHDRAWAL APPLICATION FORM

Please Note: Withdrawal applications are provided in accordance with Medical Administration Training Pty Ltd's (MAT) [Fees, Refunds & Cancellation Policy & Procedure](#). This form must be used to apply for a withdrawal. It can be emailed to info@medtrain.com.au. Before your application for a withdrawal will be considered, you must complete all the sections below and attach supporting documents (if required).

Applications will be reviewed and student will be advised of the outcome within 7 working days from date of receipt

Surname:				Given Names:			
Phone:			Title			Date of Birth	(DD/MM/YYYY)
Address:							
Suburb:				State:			Postcode:
Email address:					Student No:		
Course Name:							

WITHDRAWAL REASON

Note: Sickness must be accompanied by a Medical Certificate.

WITHDRAWAL DETAILS

Are there any fees remaining on your account?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much:	\$
		If yes, how will you make payment?	
I understand that fees may apply for withdrawal. Please view our fees and charges schedule .		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did a third party pay your fees?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
I permit MAT to close my Training Account		<input type="checkbox"/> YES	<input type="checkbox"/> NO
I understand that by closing my training account for this qualification at MAT, funding arrangements for this qualification may change in the future. If I wish to create a training account for this qualification in the future funding may no longer be available.		<input type="checkbox"/> YES	<input type="checkbox"/> NO

Student Declaration

I hereby affirm the information provided within this form to be true and accurate. I have read and understood the Fees, Refunds & Cancellation policy and understand that eligibility for a withdrawal will be assessed based on this policy.

Name:

Signature:

Date:

Office Use Only

Application Approved: Yes No

Date:

Comments:

Actioned By:

Signature: