

## **Deferment Form**

Written request from student (or parent/guardian if under 18 years) – email/letter/evidence that supports application for deferment must be attached to this Form, where applicable
Full Name:
Student ID Number:
Email:
Contact Phone Number:
Current Course Enrolled:

Reason for Deferment					
Please outline Reason:					

	Deferment		
Date when deferment is applied for: (Note: you may only apply for 12 months)	/	/	
Date you wish to recommence your studies:	/	/	

For all Students: You have the right to appeal any decision made with which you disagree. This must be done within 10 days of the date of LITA Training's decision and using the Decision Appeals Lodgement Form (available on LITA Training's website).

Student Signature:	Date of this Application:		
	/ /		
For VET For School students: I declare that I have made	□ YES		
this decision in liaison with my VET for Schools' Coordinator/representative.	□ NO		

Deferment Form

PP010/03

Page **1** of **2** 

Date Published: 23 January 2022

Next Review: January 2025



Office Use Only: Deferment							
Date Received:							
Deferment Decision:							
<ul> <li>CEO</li> <li>LITA Training advised the student that as of: course and that once the deferment end date h re-open and payments will continue as previou</li> </ul>	nas been reache						
The deferment remains valid until: /	/						
Deferment Not Approved. Reason:							
Signature:	Date:	/	/				
1. Date Payment arrangement placed on hold:	/ /	Officer's initials:					
2. Payment re-commencement actioned on:	/ /	Officer's initials:					
CHECK (tick):							
<ul> <li>Hard copy placed on Student File.</li> <li>Student has been advised of the outcome.</li> <li>Trainer/Assessor has been advised of the outcome.</li> <li>All relevant refund/deferment tasks actioned.</li> </ul> Name and position of LITA Training officer:	ome.						
Signature:	Date	: /	/				