



Course Withdrawal Form

STUDENT INFORMATION

Last Name: _____ First Name: _____
Student ID: _____ Date of Birth: _____
Mobile: _____ Email: _____

I WISH TO WITHDRAW FROM THE FOLLOWING PROGRAMME:

- Certificate in General English with Examination Preparation

CHOOSE REASONS FOR WITHDRAWAL:

- Visa decline (provide a copy of Immigration letter)
 Academic difficulty
 Transfer to other college or university (provide a copy of Offer of Place)
 Programme does not meet expectations
 Family issue
 Health
 Other: _____

*If applicable, I understand if I withdraw from the programme of study at NZEA, I will be in breach my student visa condition, and may be liable for deportation and required to leave New Zealand.

Student Signature: _____ Date: _____
Parent Signature (if under 18) _____ Date: _____

FOR OFFICE USE ONLY

Reference No.: _____ Course Start Date: _____

Applying: in person email post

- Visa denial copy attached
 Copy of plane ticket attached
 Copy of Offer of Place
 Other required document attached

Approved by: _____ Signature: _____ Date: _____