

Enrolment Extension Request Form

Diploma Qualifications — Domestic Students

Instructions for Students

Complete all sections of this form and submit it to RTO management before your current enrolment expiry date. Late applications may not be considered. Your request will be assessed having regard to your progress, engagement with training and the circumstances outlined in your application.

Extension fees apply and are payable prior to activation of the extended enrolment period. In exceptional circumstances, a fee waiver or reduction may be requested in Section 5 of this form. Supporting documentation must be attached where relevant.

Submitting this form does not guarantee approval. You will be notified of the outcome in writing within five (5) business days of submission.

Section 1 — Student Details

Full name	
Student ID number	
Date of birth	
Email address	
Preferred contact method	

Preferred contact method:

<input type="checkbox"/> Email	<input type="checkbox"/> Phone call	<input type="checkbox"/> SMS
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Section 2 – Current Enrolment Details

Qualification name	
Qualification code	
Enrolment commencement date	
Current enrolment expiry date	
Trainer / assessor name	

Units of competency not yet completed at time of this application:

Unit name	
Unit code	
Unit name	
Unit code	
Unit name	
Unit code	
Unit name	
Unit code	
Unit name	
Unit code	

Section 3 – Extension Period Requested

Select the extension period you are applying for:

Select	Extension Period	Fee Applicable	Extended Expiry date (if approved)
<input type="checkbox"/>	Three (3) month extension	\$350	
<input type="checkbox"/>	Six (6) month extension	\$650	

Please note: A maximum of one (1) extension will be granted per enrolment. Students who have previously been granted an extension are not eligible to apply for a further extension except in exceptional circumstances at the sole discretion of the CEO.

Section 4 – Reason for Extension Request

Select the primary reason for your extension request:

<input type="checkbox"/> Medical or health-related	<input type="checkbox"/> Personal or family circumstances	<input type="checkbox"/> Work or employment commitments
<input type="checkbox"/> Study-related difficulties	<input type="checkbox"/> Caring responsibilities	<input type="checkbox"/> Other (please specify below)

Please provide a detailed explanation of the circumstances that have prevented you from completing your qualification within the standard enrolment period:

What is your plan to complete the remaining units within the requested extension period? Please describe the steps you will take:

Supporting documentation attached (tick all that apply):

<input type="checkbox"/> Medical certificate or practitioner letter	<input type="checkbox"/> Statutory declaration
<input type="checkbox"/> Employer letter	<input type="checkbox"/> Other (specify):
<input type="checkbox"/> No supporting documentation is available. I understand this may affect the outcome of my application.	

Section 5 — Fee Waiver or Reduction Request (Optional)

Completion of this section is optional. If you wish to request a waiver or reduction of the extension fee, please complete this section and attach supporting documentation. Fee waiver decisions are made solely at the discretion of the CEO and are not guaranteed. The CEO's decision is final.

<input type="checkbox"/> Yes, I wish to request a fee waiver or reduction	<input type="checkbox"/> No, I do not require a fee waiver
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If yes, please provide the grounds for your fee waiver request and attach any relevant supporting documentation:

Section 6 — Student Declaration

I declare that:

1. The information provided in this form is true and correct to the best of my knowledge.
2. I understand that providing false or misleading information may result in my application being refused and may affect my enrolment.
3. I understand that submitting this form does not guarantee approval of an extension.
4. I understand that extension fees are payable in full prior to the activation of the extended enrolment period.
5. I understand that extension fees are non-refundable once the extended enrolment period has commenced.
6. I have read and understood the Enrolment Extension Policy in the Student Handbook.

Student Signature	
Full Name (print)	
Date	

Section 7 — For Office Use Only

Date application received	
Received by (name / position)	
Student progress review completed	
Progress rating at time of application	

Progress / engagement notes:

Decisions:

<input type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED	<input type="checkbox"/> APPROVED WITH CONDITIONS
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Extension period approved	
New enrolment expiry date	
Fee waiver granted. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial	
Fee amount payable	
Fee payment received (date)	
Enrolment system updated (date)	
Student notified of outcome (date)	

Progress / engagement notes:

CEO / Authorised Delegate Approval	
Full Name (print)	
Signature:	
Date	

This form must be retained in the student file for a minimum of two (2) years from the date of the student's completion or withdrawal, in accordance with the new Standards for RTOs 2025.