

## APPLICATION FOR RELEASE

According to the ESOS National Code 2018, registered providers are restricted from enrolling transferring students prior to the student completing six months of their principal course of study, unless students have met an exception under Standard 7.

You are required to submit a completed request form including supporting evidence. You will be advised of the outcome of your request within 14 business days from the receipt of your release request. Current students are required to meet with the Campus Manager to discuss your request. If a release is granted, please contact the Department of Home Affairs to seek advice on whether a new student visa is required.

**USE BLOCK LETTERS WHEN COMPLETING THIS FORM AND PLEASE KEEP A COPY.**

### STUDENT DETAILS

Title		
Mr	Ms	Other (please specify):
Family name		Given name(s)
Date of birth (dd/mm/yyyy)		Student ID

### CURRENT COURSE DETAILS

I am enrolled in the following course (please tick):

Undergraduate courses	Postgraduate courses
<input type="checkbox"/> Diploma of Business	<input type="checkbox"/> Graduate Certificate in Accounting
<input type="checkbox"/> Bachelor of Business	<input type="checkbox"/> Master of Accounting
<input type="checkbox"/> Bachelor of Business (Accounting)	<input type="checkbox"/> Master of Professional Accounting
<input type="checkbox"/> Bachelor of Business (Finance)	<input type="checkbox"/> Graduate Certificate in Business Administration
<input type="checkbox"/> Bachelor of Business (Hospitality and Tourism Management)	<input type="checkbox"/> Graduate Diploma of Business Administration
<input type="checkbox"/> Bachelor of Business (Management)	<input type="checkbox"/> Master of Business Administration
<input type="checkbox"/> Bachelor of Business (Marketing)	

### TRANSFER DETAILS

Please provide details of the course and institution at which you have been offered a place, along with the Letter of Offer and any other supporting evidence.

Institution	Campus	Course	Expected commencement date (dd/mm/yyyy)
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### REASONS FOR APPLYING FOR RELEASE

Please select reason and provide further explanation

<input type="checkbox"/> Program academically unsuitable	<input type="checkbox"/> Compelling and/or compassionate grounds	<input type="checkbox"/> Other:
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### STUDENT DECLARATION

I declare that the information provided by me is true and complete.  
 I have attached my Letter of Offer from another provider and supporting documentation.  
 I acknowledge that the provision of incorrect information or the withholding of relevant information in relation to my application may delay the processing of my application.

Student signature	Date (dd/mm/yyyy)
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## OFFICE USE ONLY

Form received date (dd/mm/yyyy)	Received by	Decision outcome (please tick)	
		Approved	Declined
Reason for outcome	Decision maker	Date (dd/mm/yyyy)	

**Privacy:** Kaplan Business School collects personal information about you for the purposes of administering your enrolment in your chosen education course(s) or program(s) of study. We may not be able to process your request if you do not provide all of the information requested on this form. We may disclose personal information about you in accordance with our **Privacy Policy** including to your education agent, and to the Australian government as required or authorised by law. Our Privacy Policy contains detailed information about how you can access and correct the personal information we hold about you, or make a privacy complaint. You may contact the Privacy Officer at [privacy@kaplan.edu.au](mailto:privacy@kaplan.edu.au) for more information.

Return this form to your Kaplan Business School Student Experience Team:

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