

## **F11 RELEASE REQUEST FORM**

The form must be filled by every student who wishes to transfer to another provider prior to completion of six months in their principal course of study. QCVE no longer issues a release letter to the student. The release request outcome will be recorded via PRISMS and the student will be communicated via their registered email.

Student Details							
Student name:							
Student ID:							
Course enrolled in:							
Reason for the request of release (a brief summary of the reason to support the application):							
Important information:							
<ol> <li>Attach any relevant supporting documents to this form.</li> <li>If Release is granted, the release will be provided at no cost to the student.</li> </ol>							
3. The Student is advis		•					
4. Release request will be proceed within 14 working days of submitting this form.							
5. Student is requested to refer to Refund Policy for any relevant refunds.							
Student Declaration:							
I understand and acknowledge that this Transfer of Provider request will be processed in							
accordance with QCVE Transfer between Registered Providers Policy and Procedure.							
I am aware that the decision to grant my release may have an effect on my student's visa. I am							
responsible for contacting the Department of Home Affairs (DoHA) to seek advice on whether this will							
affect my student's visa status. All the information provided in the form is correct and complete. Notwithstanding, should my request be denied, I have 20 working days to access the Complaints and							
Appeals process to appeal this decision as outlined on the QCVE website and student handbook.							
Student Name:							
Signature			Date				



Office use only									
Date of Application receive									
Letter of Offer from another RTO / Relevant supporting documents attached?				🗌 Yes	🗌 No				
Principal Course Name									
Last Class Attended									
Finance Approval with Signature	☐ Yes		No						
Release granted?	☐ Yes		No						
If not Granted, the Reason									
Copy of the email to inform the student of grant/refusal placed in the student's file.	☐ Yes		□ No						
Application processed by:	·		·						
Staff's signature:									
Date:									