Sunbeam International College
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AREA OF SERVICE-DEFERAL, SUSPENSION OR CANCELLATION OF ENROLMENT

APPLICATION FORM			
Date:		Student Name:	
Student ID:		Course:	
Period of Deferral: I, _____ would like to defer /suspend /cancel my current studies from _____(to)_____ due to the following reason/s			

*Please provide all supporting documents for the granting and recording of your Deferral, Suspension or Cancellation of Enrolment upon application	
Student Name:	
Student Signature:	
Administration Signature:	