



SUSPENSION APPLICATION FORM

ABOUT THIS FORM

This form is to be used when applying to suspend your enrolment with IOIS for up to 12 months. You must provide evidence of **compassionate or compelling circumstances** (such as medical, family, wellbeing, or other serious personal reasons beyond your control). Supporting documents, such as a medical certificate, must be submitted with your application.

STUDENT DETAILS

GIVEN NAME		SURNAME	
DATE OF BIRTH			
ADDRESS			
EMAIL ADDRESS			
PHONE		STUDENT NUMBER	
GENDER	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other

REASON FOR SUSPENSION

Please briefly describe the reason you have decided to suspend your studies.	
Please specify the dates you would like to suspend your studies from and to (up to a maximum of 12 months).	
STUDENT SIGNATURE	
DATE	