Notification of Withdrawal Request Form – Qualification

To formally notify us of your intention to withdraw from a qualification, you must complete and return this form to Kaplan Professional. There are different academic grades recorded on your transcript according to the date you notify Kaplan Professional of your intention to withdraw. Please note you will be immediately withdrawn from the subject/s online learning portal.

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

PERSONAL DETAILS

Title: Dr/Mr/Mrs/Ms/Miss/Other: Personal ID:

First Name(s): Last Name:

Email:

Phone: (H) (W) (M)

QUALIFICATION INFORMATION

Qualification Name:

Trimester/Study Period: Year:

Reason for withdrawing*:

* Students may attach relevant documentation.

PRIVACY

We recommend that you read Kaplan’s Privacy Policy published on our website.

STUDENT DECLARATION

I hereby authorise Kaplan to withdraw me from the above mentioned qualification/s.

Signature: Date:

Return this form to the Kaplan office via:

MAIL Kaplan Professional Notification of Withdrawal Application GPO Box 9995, Sydney NSW 2001

FAX +612 9908 0250

EMAIL studentadvice@kaplan.edu.au

APPLICATION ASSISTANCE

Contact your Student Adviser or call 1300 135 798 (+612 8248 7611).