

## Request For Release- Form

### Release request Form

A Release Request Form is a formal document completed by an international student to request permission to transfer their enrolment from their current registered training organization (Yarra College) to another provider. This form is used to initiate the process in compliance with student transfer policies, ensuring alignment with the provider's obligations under the Standards for RTOs 2025 and relevant ESOS regulations.

#### Student details:

<b>Full Name:</b>			
<b>Student ID:</b>		<b>Phone Number:</b>	
<b>Course Code:</b>		<b>Course Name:</b>	
<b>Course start date:</b>	/ /	<b>Last day of study (if applicable)</b>	
<b>Email ID:</b>			

#### Reason for release request *(Attach any supporting evidence, if any):*

#### Supporting Documents *(Required in all cases):*

- ☐ Valid Offer Letter from another CRICOS-registered provider (mandatory)
- ☐ Letter of Explanation from the student outlining the reason for release
- ☐ Medical Certificate
- ☐ DHA visa cancellation/refusal notice (if applicable)
- ☐ Proof of consultation with Student Support Officer
- ☐ Others, Please Specify
- ☐ Supporting certificates
- ☐ Others; please specify: \_\_\_\_\_

#### Student Declaration:

##### I Understand/ have been informed that:

- ☐ This request will be assessed in accordance with Yarra College's Transfer Between Registered Providers Policy and **the National Code Standard 7**.
- ☐ Applications must **include supporting documents** (e.g., offer letter from another provider, compassionate/compelling evidence). Incomplete applications will not be processed
- ☐ For any visa-related inquiries, students should reach out directly to the Department of Home Affairs (DHA).
- ☐ If approval is granted, the Release Letter will be provided free of charge.
- ☐ If your release request is not approved, you have the right to appeal the decision under Yarra College's Complaints and Appeals Policy
- ☐ I should consult the **Refund Policy & procedure** for details regarding any possible refunds.
- ☐ A written outcome regarding your release request will be provided within 7 working days of receiving a complete Application

**Student Signature:**

**Date:** / /



**Yarra College**  
Australia

RTO Number: 45992  
CRICOS Provider Number: 04115A

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### STAFF USE ONLY:

<b>Application received by:</b>	<b>Name:</b>		
	<b>Signature:</b>		
<b>Reviewed &amp; assessed by:</b> <i>(Training Department)</i>	<b>Name:</b>		
	<b>Signature:</b>		
<b>Release decision made by:</b>	<b>Name:</b>		
	<b>Signature:</b>		
<b>Decision of request:</b>	<input type="checkbox"/> <b>Granted</b> <input type="checkbox"/> <b>Not Granted</b>		

☐ Reason for Granting/Rejecting the Release: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Evidence reviewed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Student informed of outcome and appeal rights: Yes ☐ No ☐