



INS0025

UTS College Student ID Number

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Transfer to Another Provider (International Student)

Date of Application (DD/MM/YYYY): _____

Scholarship Student? **Yes** **No** If you are a scholarship student, written approval is required from your sponsor when submitting this application.

Family Name: _____

Given Names: _____

Date of Birth (DD/MM/YYYY): _____

Unit No: _____ Street No: _____

Street Name: _____

Suburb: _____ Postcode: _____

Telephone: _____ Mobile: _____

Email: _____

I. Reason for Transfer:

1. _____

2. _____

3. _____

*A detailed statement must be provided to support your release request.

II. Document Checklist:

Please provide the following documents to support your request:

A completed Application to Transfer to Another Provider (International Student) form

A signed personal statement detailing reasons for the transfer

Supporting documents for the reasons stated

A copy each of current visa and passport

An offer letter from the new provider

III. Conditions:

1. You should continue to attend classes, submit assignments and attend exams etc. until you have received a written approval for your transfer request. Failure to do so may impact on your visa and future studies.
2. You agree that UTS College may contact any institutions for document verification, including medical records.
3. You agree that to make an informed decision about your release request, assessing staff require full access to all documents provided to Academic Advisers and other staff.
4. An application for release does not guarantee the grant of release. UTS College will assess and reply to this request in writing within ten working days from the date of submission of all required documents and information. Failure to provide adequate documents may result in further enquiries from UTS College, thus delaying the process.
5. Please be aware that cancelling your enrolment may affect your student visa.
6. If you are under 18 years of age, your parent or guardian must also sign this form (in the case of guardian, proof of guardianship is required to assess your request).

Student Signature: _____

Date (DD/MM/YYYY): _____

By checking this box, I agree to my submitted application being processed, and the Terms & Conditions at the end of this form.

Parent/Guardian Signature: _____

Date (DD/MM/YYYY): _____

For students under 18 years of age
*Homestay hosts are not permitted to sign as parents or guardians.

By checking this box, the parent/guardian agrees to the submitted application being processed, and the Terms & Conditions at the end of this form.

Lodging this form along with other supporting documents

Email (preferred lodgement method) to: studentcentre@utscollege.edu.au

In Person: UTS College
UTS Building 5, Block C, Level 1 (Ground Floor)
1-59 Quay Street, Haymarket

OFFICE USE ONLY

Application received by: _____

Date received (DD/MM/YYYY): _____

Student under 18 years of age?

Yes

No

UTS College Limited ABN 39 001 425 065 | CRICOS Provider Code: 00859D /
TEQSA Provider Identification No: PRV12022, Provider Category: Institute of Higher Education
University of Technology Sydney CRICOS Provider Code: 00099F /
TEQSA Provider Identification No: PRV12060, Provider Category: Australian University
UTS College Limited is a controlled entity of the University of Technology Sydney (UTS),
and as an institute of higher education, UTS College Limited provides pathway courses to UTS.
Version September 2024 1306086038_0924

Terms & Conditions

For students:

By submitting this form, I acknowledge and agree to the following.

- a) To the best of my knowledge, the information provided in this form is true and correct.
- b) I have read, understood and accept the conditions (if any) set out in the form.
- c) I am authorised to disclose the personal and sensitive information (as applicable) provided in this form and acknowledge that such information (including my own) will be collected, used, stored and disclosed in accordance with the UTS College privacy policy, available **here**.

Students under 18:

For parents/guardians if the student is under 18:

By submitting this form, I acknowledge and agree to the following.

- a) I am the parent/guardian of the student to which the form relates.
- b) To the best of my knowledge, the information provided in this form is true and correct.
- c) I have read, understood and accept the conditions (if any) set out in the form.
- d) I am authorised to disclose the personal and sensitive information (as applicable) provided in this form and acknowledge that such information (including my own) will be collected, used, stored and disclosed in accordance with the UTS College privacy policy, available **here**.