# Extension Application Form

*To lodge this form, return it to Kingston Academy of Australia <info@kingstonacademy.edu.au>. Every request is reviewed on a case-by-case basis. You will receive a response within ten (10) business days.*

|  |
| --- |
| **Section A - Personal Detail** |

|  |  |  |  |
| --- | --- | --- | --- |
| Student Number: |  | Student Name: |  |
| Date of Birth: |  | Mobile Number: |  |
| Email Address: |  | | |
| Postal Address: |  | | |

|  |
| --- |
| **Section B - Current Enrolment Details**  ***(Please attached relevant documents to support your request)*** |

|  |  |  |  |
| --- | --- | --- | --- |
| Course Code and Title: |  | | |
| Proposed completion period: |  | Requested completion period: |  |
| Reason for Request: | Medical Reasons (attach supporting documents, e.g., medical certificate)  Delayed Assessments / Placement  Personal or Family Circumstances  Academic Difficulties  Other (Please specify) : | | |

|  |
| --- |
| **Section C - Acknowledgment of Service Fee** |

A service fee of **$50** is required for processing this request. This fee is non-refundable and must be paid before the request is reviewed. The Kingston Academy of Australia bank details are as follows:

|  |  |
| --- | --- |
| Account name: | F&Z Education Pty Ltd |
| Bank Name: | Commonwealth Bank of Australia |
| Bank address | 21 Swanston Street, Melbourne, VIC 3000 |
| Branch Number (BSB): | 063011 |
| Account Number: | 10803129 |
| SWIFT code: | CTBAAU2S |

|  |
| --- |
| **Section F - Declaration** |

I, the undersigned, confirm the tuition fee are paid up to date. I acknowledge that I have read and understood the Extension Policy and Procedure. I am aware changes to my enrolment may affect my Student Visa and I should seek advice from DIBP. I certify that the information provided in this form is correct and complete.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Office use only** |

|  |  |
| --- | --- |
| Approved by: |  |
| Signature: |  |
| Date: |  |