

## **APPLICATION FOR COURSE DEFERRAL**

1. Instruction	
Use this form to request a deferral from your course.	
> This form must be completed in full and returned by mail or in person to the OFM Student Administration Office. This form CANNOT be emailed.	
O'Halloran Fire & Medical Pty Limited Ph: 1300 72 1444 Student Administration Office P.O. Box 303 Horsley Park 2175 Australia	
2. Your Details	
Have you commen	ced your course: Yes No Student Number:
Year/s of study:	e.g. Jan23-Jun23
Name:	Family Name Middle Name/s
Current Address:	
-	
Date of Birth:	Phone: E.Mail:
	(dd / mm / yyyy)
3. Course Details	
Course Code:	Course Name:
4. Details of Deferral	
Deferral Dates, Sta	rt:Return:
OFM will allow you to defer your course for up to 3 months without penalty. In certain cases you may apply to extend this to 6 months, for example: financial or medical matters preventing immediate return or compulsory overseas military service.	
Do you intend to undertake study at another Institution in Australia or overseas during the deferment period?	
Yes	No If Yes, where and what course?
5. Applicant Dec	aration
I declare that the information contained in this form is true and correct and understand that if information provided by me is misleading or incorrect, the offer of a place or my current enrolment may be withdrawn.	
Applicants Signature	e: Date:
6. Administration	Use Only
Accepted Reje	cted Comments
e.Mail Sent	
Letter Sent	Processed by: Date:
DO NOT EMAIL THIS	FORM. Return by mail or in person to the OFM Student Administration Office.
www.ofm.edu.au RTO Number 91539 ABN 80 095 033 364 Form: DE1, Rev: 08/2023	