

Application for Course Suspension

About this form: You need to complete this form if you wish to request a suspension on your enrolled course with Rapid Training. You are strongly advised to read the information in the student handbook on Course Progression and Completion prior to submitting this request. There are three sections to this form:

- Section 1—Student & Course details
- Section 2—Request details
- Section 3—Application Decision

Unless otherwise indicated, you must provide a response to each question and to each part of each question. A separate form is required for each course.

Application Fee: There is no fee associated to apply and have evaluated your request to suspend an enrolled course.

Submitting the request: This request must be submitted by email to training@rapidsolutions.com.au

Section 1—Student & Course details *(to be completed by student)*

Student Name:		Application Date:	/ /20
Email:		Phone Number:	
Course:	<input type="checkbox"/> CPP30115 Certificate III in Urban Pest Management <input type="checkbox"/> General Pests <input type="checkbox"/> Timber Pests <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Pest Management for Support Staff - Level 1 <input type="checkbox"/> Pest Management for Support Staff - Level 2 <input type="checkbox"/> Bed Bugs Management <input type="checkbox"/> Bed Bugs Management - Accommodation		
Course Start Date:	/ /20	Course Expiry Date:	/ /20

Section 2—Suspension Request details *(to be completed by student)*

Course Suspension Start Date:	/ /20	Course Recommencement Date:	/ /20
Reasons for Course Suspension:	<input type="checkbox"/> Medical (Personal) – evidence attached <input type="checkbox"/> Other. Please provide details: _____		
	<input type="checkbox"/> Medical (Carer Support) – evidence attached		
Student Signature:		Application Date:	/ /20

Section 3—Application Decision *(to be completed by RT Management)*

Reviewed By:		Reviewed Date:	/ /20
Application Status:	<input type="checkbox"/> Approved <input type="checkbox"/> Declined <input type="checkbox"/> Approved, with Conditions/ Requests Modifications		
Suspension Start Date:	/ /20	Course Recommencement Date:	/ /20
Application Outcome Notes: <i>(Conditions/ Modifications / Feedback)</i>			
Advised Student of Application Outcome:	<input type="checkbox"/> Email Sent Date: / /20 <input type="checkbox"/> Updated VETtrak <input type="checkbox"/> Updated Coassemble Access		