

**Application for Transfer between Teaching Locations Appeal (Section 2)**

|  |                      |                                  |
|--|----------------------|----------------------------------|
| <input type="text"/>                                 | <input type="text"/> | <input type="text"/>             |
| FedUni Student ID Number                             | Program Code         | Year Level                       |
| Program Name <input type="text"/>                    |                      |                                  |
| <input type="text"/>                                 |                      |                                  |
| Campus or Provider and Location <input type="text"/> |                      | Campus Code <input type="text"/> |

**Nominated Officer to complete.**

Please forward this appeal and all supporting documentation to Manager, International Student Compliance <internationalcompliance@federation.edu.au>

**Student Details:** Title  First Name

Other Names

Family Name

Date of Birth  /  /  /  /  /  Is the international student studying in Australia?  yes  no

**Details of Appeal**

Date original application received  /  /  /  /  /  Date of response to the original application  /  /  /  /  /

Date this application received  /  /  /  /  /

Name of Nominated Officer that made the original ruling?

Position/Title of Nominated Officer that made the original ruling?

Name of person completing this document if different to above?

**Supporting Documentation:** Please ensure the following documents are attached to this application prior to forwarding to Manager International Providers:

Copy of the original application

Copy of the official response to the students application

Additional supporting documents from the student on appeal

Additional supporting documents from the Partner Provider (e.g. Attendance records, Academic Progress Reports or Counsellors Reports)

**Recommendation:** In light of any additional documentation that may have been submitted with this appeal the Nominated Officer is asked to make a recommendation on this appeal.

Original decision is supported  yes Appeal is supported  yes

Appeal outcome letter sent to student  yes

Copy of appeal outcome letter sent to PP or ISP  yes

If appeal is supported, original 'Application to Transfer between Teaching Locations' form sent to Student Administration for processing  yes

Nominated Officer Name

Position

Telephone (  )

eMail

Nominated Officer Signature

Date  /  /  /  /  /

**Comments:**