GUIDELINES FOR REMOVAL OF FINANCIAL LIABILITY AND/OR ACADEMIC PENALTY IN SPECIAL CIRCUMSTANCES

Introduction

This Application for Removal of Financial Liability and/or Academic Penalty in Special Circumstances form (hereinafter referred to as ‘the form’) is to be used by international students who wish to apply for removal of their financial liability and academic penalty where special circumstances have affected the student’s ability to successfully complete their studies. The purpose of these guidelines is to provide clear instructions to students to assist them in determining if they should apply for removal of their financial liability and/or withdrawal without academic penalty.

Please ensure that the guidelines are read before completing the form.

Reasons for Applying

Removal of Financial Liability

This is to request that one of the following actions occur due to your inability to complete the identified course(s):

- Tuition fees are re-credited; or
- Tuition fees are refunded.

Note: The University does not refund SSAF payments.

Removal of Academic Penalty

You may also be eligible for Removal of Academic Penalty if you:

- withdrew from course(s) after week 9 and are given a Withdrawn Fail (WF) final grade on your academic record; or
- are given a Fail (FL) final grade on your academic record after Grade Release date; or
- are requesting your final grade on your academic record to be removed due to special circumstances

Note: In considering your application it may be determined that your final grade on your academic record be changed to Withdrawn without academic penalty (WN) for course(s). However, a change to WN does not automatically result in the removal of financial liability.

Eligibility requirements

Eligibility Criteria

To be eligible to apply for removal of Financial Liability and/or Academic Penalty due to special circumstances, all of the following criteria must be met:

- you were unable to continue your study after the census date due to special circumstances; and
- you were unable to successfully complete the requirements of the course(s); and
- the application is made within 12 months from your withdrawal date from the course(s), or if you have not withdrawn from your course(s), or have not given a notice of withdrawal from the University of the Sunshine Coast (USC) within 12 months from the enrolment period end date.
Special Circumstances Criteria
You must meet all the special circumstances criteria listed below:

1. The special circumstances were beyond your control
   A situation occurs that a reasonable person would consider is not due to your action or inaction, either direct or indirect, and for which you are not responsible.

2. Those special circumstances did not make their full impact until after the census date*
   Your circumstances occurred:
   i) before the census date, but worsened after that day; or
   ii) before the census date, but the full effect or magnitude did not become apparent until on or after that day; or
   iii) on or after the census date

3. Due to special circumstances, you were unable to complete your course requirements
   You were unable to:
   i) undertake the necessary private study required, attend sufficient lectures or tutorials, or meet other compulsory attendance requirements in order to meet your compulsory course requirements; or
   ii) complete the required assessable work; or
   iii) sit the required examinations; or
   iv) complete any other course requirements because of your inability to meet i), ii) or iii) above.

Note: Census dates for study periods are detailed at: www.usc.edu.au/calendars

Examples of Special Circumstances

Medical reasons

Example:
A detailed medical certificate signed by a medical practitioner to substantiate your claims.

Family/personal reasons

Due to unforeseen family/personal reasons that occurred or worsened after the census date and that are beyond your control, you are unable to continue with your studies.

Example 1:
A member of your family suffers from a severe medical condition and, after the census date, you are required to provide full time care. As a result, you are unable to continue with your studies.

Example 2:
A member of your family or close friend dies and you are affected to the extent that, after the census date, you realise that you are unable to continue with your studies.

Course related reasons

USC changes the arrangements for your course and, as a result, you are disadvantaged to the extent that you are unable to complete the requirements of the course.

Example:
You enrol in a course, having applied for credit towards the courses previously undertaken at another institution, and are not advised of the decision for credit by USC until after the census date.

Special circumstances do not include:
- A lack of knowledge or understanding of withdrawal procedures and/or census dates.
- Forgetting that you are enrolled in a course(s) or to drop a course(s).
- Insufficient funds
Statement of Special Circumstances

You must provide information on your special circumstances to meet the Special Circumstances Criteria which are outlined in these guidelines (refer page 1). A statement can be written directly into the application form on page 6 or provided as an attachment. The statement must be signed and dated by you.

The statement outlining your circumstances is not sufficient evidence on which to base your application. While your statement will be taken into consideration when assessing your application, independent supporting documentation MUST be attached (refer below) or your application will not be considered.

Supporting Documentation

You MUST provide independent supporting documentation to substantiate your claims which includes confirmation of the dates when your special circumstances occurred. You will need to ensure that your supporting documentation is on official letterhead (if relevant), and is signed and dated. A copy of the document must be certified by a Justice of the Peace. Alternatively, USC International staff can sight the original copy.

Medical reasons
You are required to supply a detailed medical certificate to substantiate your claims. Documentation must include:
1) full dates of illness/special circumstances; and
2) at what date the circumstances prevented you from studying; and
3) potential implications on your USC studies.

Family/personal reasons
You will need to supply documentation from, for example, a medical practitioner or counsellor, to substantiate your claims.

Course related reasons
You will need to supply supporting documentation to substantiate your claims.

It is your responsibility to ensure that all relevant documentation is included with the form. USC is unable to source this information for you.

Application Instructions

1. Carefully read the guidelines to determine your eligibility to apply.
2. Complete the form, ensuring full details are included and the form is signed and dated by you.
3. If you have made a payment towards your Tuition fees and are requesting a refund of these fees, complete an Application for Refund in Special Circumstances Form.
4. Attach all supporting documentation.
5. Return the completed form and supporting documentation to:

   In person: USC International
   Level 1, Building J

   Mail: USC International – ML17
   University of the Sunshine Coast
   Locked Bag 4, Maroochydore DC QLD 4558

False or Misleading Statement or Information

It is a criminal offence to knowingly make a false or misleading statement or to otherwise knowingly supply false or misleading information in connection with an application. Applicants who knowingly supply false or misleading statements or information may be liable to criminal prosecution and/or USC disciplinary action.
Review of the Decision

If you are not satisfied with the decision, you may apply for a review of the decision.

If you apply for reconsideration, a different decision maker within USC will consider your application and USC will then notify you in writing of the outcome of the reconsideration process (you should allow a further 2-4 weeks).

If, after USC has reconsidered your application, you remain dissatisfied with the result, you may apply to the Administrative Appeals Tribunal (AAT) for a review. The AAT website address is www.aat.gov.au, Tel: 1300 366 700

The availability of complaints and appeals processes, does not remove your right to take action under Australia’s consumer protection laws.

Should your enrolment at USC be affected by the outcome of this application, the Department of Immigration and Border Protection (DIBP) will be notified and this may affect the validity of your Student visa.
APPLICATION FOR REMOVAL OF FINANCIAL LIABILITY AND/OR ACADEMIC PENALTY IN SPECIAL CIRCUMSTANCES

1. PERSONAL DETAILS

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<th>USC student ID number</th>
<th>Family name:</th>
<th>Given name:</th>
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<tr>
<th>Telephone number:</th>
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<td></td>
<td>@student.usc.edu.au</td>
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<th>Number and street / PO Box:</th>
<th>City / Suburb:</th>
<th>State:</th>
<th>Postcode:</th>
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<th>Program of study:</th>
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2. REASON(S) FOR APPLICATION

**Note:** If you are applying for Removal of Academic Penalty and Financial Liability, please tick both boxes.

I wish to apply for a removal of:

- [ ] Academic Penalty
- [ ] Financial Liability

Did you make a payment towards your Tuition Fees?

- [ ] Yes and I would like this amount re-credited to my USC Student Account for future student tuition fee liability
- [ ] Yes and I would like a refund of this amount as I am not re-enrolling (Refund form on page 9 must be completed)
- [ ] No

3. COURSE DETAILS

Details of the course(s) for which you are applying to have Financial Liability or/and Academic Penalty removed.

<table>
<thead>
<tr>
<th>Semester/Session/Trimester (eg Semester 1, Session 11, Trimester 1)</th>
<th>Year (eg 2012)</th>
<th>Course code</th>
<th>Course name</th>
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4. STATEMENT OF SPECIAL CIRCUMSTANCES

You must provide information on your special circumstances, specifically how those circumstances:

- were beyond your control; and
- did not make their full impact until after the census date; and
- prevented you from completing course requirements.

Note: Ensure you include dates and the time periods that the circumstances occurred.

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If insufficient space, please attach additional pages

5. STUDENT CHECKLIST

☐ I have read and understood the Guidelines for Removal of Financial Liability and/or Academic Penalty in Special Circumstances

☐ My Statement of Special Circumstances is attached or written on the form in Section 4 above.

☐ My supporting documentation is attached

You must read Supporting Documentation (refer page 3) to ensure that you have provided sufficient documentation with this application.

☐ My medical certificate is attached or USC Medical Certificate (page 8) is completed by medical practitioner (if applicable).

6. STUDENT DECLARATION

- I declare that the information I have given on this application is true, correct and complete. I understand that if I knowingly make any false or misleading statements, I may be liable for prosecution.
- I understand that if I provide insufficient evidence and/or documentation with my application it may result in my application not being processed.
- I authorise the University of the Sunshine Coast to provide information about my application to the Department of Education.
- I understand that should my enrolment at USC be affected, DIBP will be notified of the change and this may affect the validity of my Student visa.

Student signature: _____________________________________________________ Date: ___________________________
PRIVACY STATEMENT

The University of the Sunshine Coast collects, stores and uses personal information only for the purposes of administering student and prospective student admissions, enrolment and education. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory authority requirements. For further information consult the University’s Privacy plan at: www.usc.edu.au/privacyplan

Information is also collected on this form in order to meet our obligations under the ESOS Act and the National Code 2007; as applies to Student visa holders, to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally. The authority to collect this information is contained in the Education Services for Overseas Students Act 2000, the Education Services for Overseas Students Regulations 2001 and the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2007. This information can be provided, in certain circumstances, to the Australian Government and designated authorities and, if relevant, the Tuition Assurance Scheme and the ESOS Assurance Fund Manager.

ENQUIRIES

USC International
Tel: +61 7 5430 2843
Email: AskUSCI@usc.edu.au

Office Opening Hours
Monday – Friday: 9.00 am – 5.00 pm

LODGEMENT

In person: USC International – First floor, Building J
Mail: USC International – ML17
University of the Sunshine Coast
Maroochydore DC QLD 4558
MEDICAL CERTIFICATE
FOR REMOVAL OF FINANCIAL LIABILITY AND/OR
ACADEMIC PENALTY IN SPECIAL CIRCUMSTANCES

Applicable CENSUS DATE:
(Student to complete)

IMPORTANT NOTE FOR STUDENT

Students applying for Removal of Financial Liability and/or Academic Penalty in Special Circumstances based on medical grounds MUST have a medical practitioner complete this form or provide an independent medical certificate. If an independent medical certificate has been issued, attach it to this application form.

MEDICAL EVIDENCE

To enable assessment of an application, written confirmation is required that indicates how those circumstances:

- were beyond your control; and
- did not make their full impact until after the census date; and
- prevented you from completing course requirements.

Medical Practitioner confirmation should include:

- when the illness commenced; and
- when the illness ended (if applicable); and
- any potential implications of the illness on the student’s university studies; and
- any other information we should be aware of to assess this application.

MEDICAL CERTIFICATE

I, ___________________________ a legally qualified medical practitioner, certify that on ___/___/___
(Name)________________________
(Date)_______________________

I examined
(Patient’s name in BLOCK LETTERS)

Date circumstances / illness commenced: ___/___/___
Date circumstances / illness no longer evident (if applicable): ___/___/___

At what date did the patient’s circumstances prevent them from studying:

The patient is suffering from

(Diagnosis to be provided with patient consent where possible)

Where the nature of the complaint cannot be divulged for privacy reasons, the University will accept a statement from the medical practitioner indicating that the condition cannot be revealed, provided the following assessment of severity is completed

Tick applicable box(es) below:

☐ In my opinion, I believe that due to their circumstances/illness the patient is medically unfit to continue his/her studies for the dates stated above.

☐ I believe the following information is also pertinent for assessment of the patient’s application (please attach additional documents if preferred).

Doctor’s signature: ___________________________
Date: ___/___/___

Are you this student’s regular Doctor? ☐ Yes ☐ No

Doctor’s name and address ___________________________ (OFFICIAL STAMP)
APPLICATION FOR REFUND IN SPECIAL CIRCUMSTANCES

IMPORTANT INFORMATION

Complete this form only if you have made a full or partial payment towards the tuition fee that you have requested to remove.

1. PERSONAL AND CONTACT DETAILS

<table>
<thead>
<tr>
<th>USC student ID number</th>
<th>Family name:</th>
<th>Given name:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone number:</th>
<th>Email address:</th>
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</table>

Mailing address:

Number and street / PO Box: ____________________________

City / Suburb: ____________________________ State: ____________________________ Postcode: ____________________________

2. REFUND DETAILS

All details MUST be completed for payment to be made.

☐ Tuition fees $ ____________________________ USC receipt number: ____________________________ Payment Date: ____________________________

☐ Other $ ____________________________ Amount paid: $ ____________________________

Total refund: $ ____________________________

Provide bank account details for payment:

Beneficiary account name: ____________________________

Name of bank: ____________________________ Address of bank (overseas bank account only): ____________________________

Account number or IBAN: ____________________________ BSB or Branch number (if applicable): ____________________________

SWIFT Code (Must be provided for overseas bank accounts): ____________________________

Required currency (overseas bank account only): ____________________________ Amount $ ____________________________

Bank advised of receiving OTT (overseas bank account only): ☐ Yes ☐ No – If No, the overseas bank may return or hold funds until they are advised

STUDENT DECLARATION

I declare that to the best of my knowledge the information supplied is correct and complete. I acknowledge that incomplete information may result in the application being returned to me.

Student signature: ____________________________ Date: ____________________________

PRIVACY STATEMENT

The information on this form is being collected for the express purpose of processing your refund and will not be disclosed to third parties. The University of the Sunshine Coast Privacy Policy is located at: www.usc.edu.au/privacypolicy
### USC INTERNATIONAL USE ONLY (INTERNATIONAL STUDENTS)

<table>
<thead>
<tr>
<th>Cancellation fee amount</th>
<th>Item type:</th>
<th>Approved refund amount</th>
<th>Date:</th>
</tr>
</thead>
</table>

Authorised by: Director, USC International or Finance Officer, USC International

Signature: 

Date: 

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### FINANCIAL SERVICES USE ONLY

<table>
<thead>
<tr>
<th>COST CODES</th>
<th>Item type</th>
<th>Approved refund amount</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travelex fee</td>
<td>099</td>
<td>00000</td>
<td>25930</td>
</tr>
</tbody>
</table>

Foreign currency amount: 00000

Exchange rate: 00000

Travelex fee: 25930

AUD $ amount: $10.00

Total AUD amount: $10.00

Plus AUD $10.00 fee

Checking Officer 1:

Signature: ______________________________ Date: _____________

Checking Officer 2:

Signature: ______________________________ Date: _____________