



TIIS
THE INSTITUTE
OF INTERNATIONAL
STUDIES



Deferment, Suspension, or Cancellation of Enrolment

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1. Purpose

This policy ensures that The Institute of International Studies (TIIS) provides a transparent, fair, and compliant process for international students to defer, temporarily suspend, or cancel their enrolment in accordance with:

- Standard 9 of the *National Code 2018*
- Sections 19 and 20 of the *ESOS Act 2000*
- Relevant visa requirements under the *Migration Act 1958*
- Higher Education Standards Framework 2021 (Standards 2.3, 7.2, 7.3)

It also outlines TIIS's obligations and student rights, including access to internal and external appeals processes.

2. Scope

This policy applies to all international students enrolled in CRICOS-registered courses at TIIS, including those enrolled through third-party delivery arrangements.

3. Definitions

Updated definitions remain as per the previous version, with clarification added to:

- **Compassionate or Compelling Circumstances:** includes serious illness, family emergencies, visa delays, or other circumstances as determined by TIIS and supported by documentary evidence.
- **Misbehaviour:** clarified to include serious breaches of academic integrity, unlawful behaviour, or actions that compromise the health, safety, or reputation of the TIIS community.

4. Policy Principles

4.1 Regulatory Alignment

- All actions under this policy comply with ESOS Act s19, requiring notification to DET/DHA via PRISMS within 31 days of any change to student enrolment status.
- Policy reflects Standard 9.2, 9.3, and 9.4 of the *National Code 2018*, ensuring:
- Deferment/suspension only occurs on *documented compassionate or compelling grounds* or misbehaviour.
- Students are notified in writing and granted access to a 20-working day internal appeals process.
- Student enrolment is maintained during appeals under Standard 8 unless extenuating circumstances apply.

4.2 Compliance with HESF

- Student wellbeing and safety (2.3.1 & 2.3.2) are considered when assessing deferment/suspension requests.
- Clear information (7.2.2 & 7.2.3) is provided pre-enrolment and throughout the student lifecycle.

5. Enhanced Procedures – Step-by-Step

5.1 Student-Initiated Deferment or Temporary Suspension

Eligibility: Only approved under compassionate or compelling circumstances.

Step-by-Step:

Step	Action	Responsible
1	Student completes the “Application for Deferment or Suspension” form	Student
2	Student provides documentary evidence, e.g. medical certificate, police report, etc.	Student
3	Registrar verifies documentation and refers to Dean if required	Registrar
4	Case assessed against National Code 9.2(a) and HESF 2.3	Registrar / Dean
5	Decision issued to student within 5 working days	Registrar
6	If approved, PRISMS updated within 31 calendar days	Registrar
7	Student advised to contact Department of Home Affairs regarding visa impact	Registrar
8	Records filed and included in deferment register	Registrar / Compliance

5.2 Student-Initiated Cancellation of Enrolment

Eligibility: Applies when students voluntarily withdraw or transfer.

Step-by-Step:

Step	Action	Responsible
1	Student completes the “Withdrawal Form” with reason and evidence	Student
2	Registrar arranges exit interview (where applicable)	Registrar
3	For transfer, Student Transfer Policy procedures are applied	Registrar
4	Cancellation recorded and PRISMS updated within 10 days	Registrar
5	Refund processed as per Refund Policy, if applicable	Finance
6	Cancellation confirmation letter issued	Registrar

5.3 Provider-Initiated Suspension or Cancellation

Eligibility: For reasons such as academic misconduct, non-payment, misbehaviour, or visa breaches.

Step-by-Step:

Step	Action	Responsible
1	Identify breach or misconduct (e.g. via academic integrity case or financial default)	Dean / Finance
2	Prepare and issue “Intention to Report” letter outlining reasons	Registrar
3	Inform student of right to appeal within 20 working days	Registrar
4	Maintain enrolment during appeal unless extenuating circumstances apply (e.g. student safety risk)	Registrar / CEO

5	If appeal not lodged or unsuccessful, PRISMS report filed within 5–10 working days	Registrar
6	Decision letter issued; support services offered (e.g., counselling, appeals assistance)	Registrar / Student Support

5.4 Internal Appeal Process (Aligned with HESF Standard 7.3)

Step	Action	Responsible
1	Student submits written appeal form with evidence	Student
2	Independent Review Panel formed (3 staff members)	Registrar
3	Panel reviews within 10 working days	Panel
4	Student notified of outcome in writing	Registrar
5	If unsatisfied, student may seek external appeal (e.g., via Overseas Students Ombudsman)	Student
6	TIIS enforces outcome and updates all systems	Registrar / Compliance

5.5 Record-Keeping and Compliance Reporting

Step	Action	Responsible
1	All actions and outcomes logged in Student Management System (SMS)	Registrar
2	Maintain files for minimum of 7 years	Registrar / Compliance
3	Include case in Quarterly Compliance Dashboard	Compliance Officer
4	Internal audit checks conducted annually	Compliance Manager
5	Trends reported to Academic Board and Board of Directors	CEO / Compliance

6. Roles and Responsibilities

A clear delineation of roles and responsibilities is essential to ensure that the implementation of this policy is consistent, fair, and legally compliant. Aligned with HESF Standards 6.2 (Corporate Monitoring) and 7.3 (Information Management), TIIS ensures that key decision-makers and staff members understand their duties in managing deferral, suspension, and cancellation matters. This structured role allocation also supports timely communication with students, accurate PRISMS reporting, and institutional accountability.

Role	Responsibilities
CEO / Registrar	Policy implementation, decision-making, PRISMS reporting, appeals review
Program Coordinator / Academic Dean	Case assessment, support during hearings
Compliance Officer/Registrar	Audit of policy application and record-keeping compliance

7. Monitoring and Quality Assurance

To ensure ongoing compliance with the ESOS framework and TEQSA regulatory requirements, TIIS integrates the monitoring of this policy into its internal quality assurance systems. Regular audits, staff training, and review cycles promote consistency, identify opportunities for improvement, and prevent regulatory breaches. This section ensures that policy application is monitored proactively, outcomes are benchmarked against good practice, and the institution remains responsive to evolving legislative requirements.

- Annual internal audits on application of this policy.
- Regular staff training for admissions, academic, and student services teams.
- Review cycle: every three years or sooner if regulatory changes occur.

8. Records Management

Accurate and secure record-keeping is critical to demonstrate regulatory compliance, procedural fairness, and transparent decision-making. In line with HESF Standard 7.3.3 and ESOS requirements under the National Code Standard 9, all decisions and communications related to deferment, suspension, or cancellation of enrolment are documented and retained. This ensures that TIIS can verify actions taken, respond to regulatory audits, and protect both institutional and student interests in the event of disputes.

- All decisions, appeals, and communications are:
- Logged in the Complaints and Appeals Register
- Stored in student files
- Retained for a minimum of 7 years in accordance with record-keeping legislation

9. Implementation and Review

This Policy will be reviewed every three years from date of implementation or earlier in response to regulatory changes or material incidents. Any changes must be approved by the Board of Directors upon recommendation from the Academic Board.

10. Related Policies

- Student Grievance Handling Policy
- Refund Policy
- Student Support and Wellbeing Policy
- Academic Integrity and Misconduct Policy

Version History

Policy title	Deferral, Suspension and Cancellation Policy
Policy Category	Students Management
Current version	3.0
Previous version (if relevant)	Same
Endorsement Bodies	EMT, Academic Board
Date of Approval	15 January 2026
Implementation Dates	Reviewed every three years from date of implementation or earlier if necessary
Date of next review	

Version	Approved by	Approval Date	Details
1.0	Board of Directors	15 February 2018	
1.1	EMC	14 October 2020	Minor Changes
2.0			
3.0	Academic Board	15 January 2026	
4.0	Board of Directors	25 February 2026	Minor changes

*****END OF POLICY and PROCEDURE*****