

Learner transfer/withdrawal form

Centre Number: _____
 Centre Name: _____
 Centre Address: _____

 Post Code: _____ Contact Number: _____

Please complete the following information for each learner:

Learner Name	Learner Number	Registered Course	Learner Withdrawn (Please tick)	Course to be transferred to (if applicable)	Centre to be transferred to (if applicable)

Reason for learner amendments: _____

Please note any transfers onto a more expensive qualification will be charged the extra cost of the qualification. Transfers onto a less expensive qualification will not be charged, however any difference will not be refunded. There is no charge for withdrawal of learners.

I confirm that any information provided is correct and as a representative of the centre I approve the above listed adjustments.

I enclose a cheque to cover expenses

Please invoice customer order No:

Signed _____ Print _____ Date _____

OFFICE USE ONLY	
Date Received: <input type="text"/> - <input type="text"/> - <input type="text"/>	Date Actioned: <input type="text"/> - <input type="text"/> - <input type="text"/>
Authorised by: _____	Invoice No: <input type="text"/> (if applicable)