

☐ Withdrawal by Student

## **Student Amendment Form**

		led by Academia
Full Name:	Date:	
Email:	Phone:	
ASN:	SIS ID:	
Course:		☐ Blended ☐ SSB
Intake Date:	Last Date Attended:	•

Please read the following as per government guidelines:

- It is the **student's** responsibility as a student to contact the Alberta Student Aid to cancel your application by calling **1-855-606-2096**
- Send an email to <a href="mailto:studentsupport@aga-academy.ca">stating you would like to withdraw from your program for documentation purposes.</a>
- As per your contract, if the contract is terminated after the program begins, the Institution is entitled to the payment of tuition fees as outlined in Section 17 of the Private Vocational Training Regulation, which is as follows:
  - o **25%** of the total tuition fees as identified in Part C: Program Cost of this contract if 10% or less of the Program is provided.
  - o **60%** of the total tuition fees as identified in Part C: Program Cost of this contract if more than 10% but less than 50% of the Program is provided.
  - o 100% if more than 50% of the Program is provided.
- It is mandatory to return all the resources you received from the school. If the resource has been used, you will be charged.
- No signature is required if the student is withdrawn due to never attending classes or for absences greater than 5 days with no communication.

Reason(s) for student amendment:	
Signature of Student:	Date Signed:

<sup>\*</sup>Signing this form authorizes AGA Academy to withdraw you from the program and deduct the outstanding amounts as per government guidelines stated above.

First Day Attended:	Last Day Attended:
First Day Attenucu.	Last Day Attended.
Comments:	
Comments.	
Acad	lemic Signature:
Admissions:	
Comments:	
Comments:	
	ssions Signature:
Admi	ssions Signature:  Loan End Date:
Admi Finance: Loan Start Date:	
Admi	