

Complete this form if you are applying for a re-credit, remission and/or repayment of fees where special circumstances apply. If your application is successful, the University will re-credit your debt or refund upfront payments.

Administration, Academic, or systems issues are not managed by the remission process.

Eligibility criteria and evidence of special circumstances

To be eligible for a remission, you must meet all of the below criteria and provide supporting documentation to validate your claim

- You have discontinued a unit after the census date or received a fail grade for a unit due to special circumstances.
- The special circumstances were beyond your control.
- The special circumstances did not make their full impact (or their full impact was not apparent) until after the [census date](#).
- You were unable to successfully complete your unit because of the special circumstances.

Please note: The application will be deemed invalid if no documentation is provided.

For more information on special circumstances: <https://policy.vu.edu.au/document/view.php?id=223#part4>

For more information on the remission criteria: <https://www.vu.edu.au/vu-brisbane/current-students-at-vu-brisbane/fees-vu-brisbane> or <https://www.vu.edu.au/vu-sydney/current-students-at-vu-sydney/fees-vu-sydney>

Supporting documentation for medical/health conditions

Your supporting documentation must:

- validate the reason you are applying for a remission of debt
- be signed and stamped by your medical/health practitioner with the medical provider number included
- outline the medical diagnosis, duration of illness, treatment plan and how the condition impacted your ability to make rational decisions before census date or was more pronounced or materially exacerbated post census date.

Supporting documentation for non-medical circumstances

For special circumstances that are non-medical, you must provide official supporting evidence that:

- validates the reason you are applying for a remission of debt
- confirms when the special circumstances occurred
- outlines how the special circumstances impacted your ability to make rational decisions before census date or prevented you from successfully completing the unit requirements after the census date.

The evidence must be relevant to the special circumstances you experienced. Examples: death certificate, police report, Victim of crime commission letter, Insurance letter confirming that your home was affected by a natural disaster, Counsellor /lawyer letter outlining special circumstances.

Application Period

You must lodge an application in writing:

- within 12 months of the withdrawal date of the unit of study or
- within 12 months of the unit result publication date.

Applications submitted outside the 12-month lodgement period will not be considered unless you can demonstrate with supporting documentation that you were incapable of applying within this timeframe.

Examples: long-term hospitalization, military service in another country, homelessness, domestic violence.

Notification of decision and review process

The Remission application will be assessed based on [VU Enrolment Policy and Procedure](#) and the decision will be notified in writing within 14 business days from when the application and all required supporting documents are received. If you are not satisfied with the decision and you have the following options for internal and external review of decision:

- you can submit a request for an internal review to principal@vusydney.edu.au within 28 days from receiving the decision
- international students can request for a review externally to the ombudsman.

Application assistance

If you need assistance completing this form or guidance on the remission application process, please seek advice from Student Administration before submitting your application.

You can submit the application and supporting evidence to studentadministration@vusydney.edu.au.

Please complete the form in **BLOCK LETTERS**

1. PERSONAL DETAILS

Student ID		Family name				
Given names				Date of birth		
Course title				Course code		
Phone			Email			
Address: (if required to have outcome posted)						
Street						
Suburb			State		Postcode	

2. COURSE AND UNIT DETAILS

What course are you currently enrolled in?

Course title		Course code	
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Units for which you are applying to have your debt remitted:

Year (eg. 2024)	Teaching Period (eg. 2B1)	Unit Code (eg. LLW2008)	Unit Name (eg. Commercial Law)

3. SPECIAL CIRCUMSTANCES

Attach your personal written statement of special circumstances together with your independent supporting documentation to demonstrate your claim. Your personal statement and supporting documents need to show that the circumstances:

- were beyond your control,
- did not make their full impact (or their full impact did not become apparent) until after the census date for the unit, and
- prevented you from successfully completing the unit/s listed above.

If your circumstances were of a health or medical nature, please ask your medical or health practitioner to complete the impact assessment statement on page 3. It would be helpful if your health care practitioner also provided a letter explaining your circumstances in more detail. Medical certificates are not sufficient as they typically don't give enough detail of your circumstances to meet the criteria above.

4. IMPACT ASSESSMENT STATEMENT

If your special circumstances were medical or psychological in nature, please ask the health practitioner who treated you to complete this impact assessment statement stating the dates of impact of your condition in the teaching period/s when you were enrolled in the units for which you are seeking remission. Your practitioner may also want to provide a supporting letter explaining the condition and its impact.

Student ID

Student name

Medical/health practitioner to complete:

The student named above consulted with me on (date/s of consultation):

regarding a medical/health condition that impacted the student from (DD/MM/YYYY): to (DD/MM/YYYY):

Please indicate your professional assessment of the level of impact of the condition on the student's activities:

Description of impact of the medical/health condition	Additional information	From (DD/MM/YYYY)	To (DD/MM/YYYY)
1. Able to travel/attend No Yes			
2. Able to do sustained reading, note-taking and writing No Yes	If yes, able to work as usual moderately less than usual significantly less than usual		
3. Able to perform a task requiring intense concentration for 1–2 hours No Yes	If yes, able to complete as usual moderately less than usual significantly less than usual		

Additional information (complete as needed):

Practitioner's signature

Date (DD/MM/YYYY)

Practitioner's stamp (as available):	(Complete only for details not provided in the stamp):
	Practitioner name Practitioner's registration number Business address Phone Email

5. STUDENT DECLARATION

- I have completed all sections of the form.
- I have attached supporting documentation to support my application.
- I have read the information and understood the information required to be eligible for a remission of debt.
- I declare the above information provided by me is true and completed in full.
- I have read the Privacy Policy and I agree to abide by the regulations and policies of VU

Signature

Date

OFFICE USE ONLY

Initial Review & Approval by Campus Operations Manager

Form and all supporting documents received Date

Form and all supporting documents verified and approved Yes No

Comments

Name

Signature

Date

Processing by Finance Officer

Application Processed Yes No Form and all supporting documents uploaded in systems Yes No

Approval updated in systems Yes No

Comments

Name

Signature

Date

PRIVACY STATEMENT

Victoria University (VU) values your privacy and is committed to handling your personal information in accordance with the Privacy and Data Protection Act 2014 (Vic) and other applicable privacy legislation. The personal information collected on this form will be used primarily for the purposes of assessing and processing this application. VU may also use and disclose your personal information to verify the information provided by you, to comply with government and other reporting requirements and/or to carry out associated activities connected with this application. Your personal information may also be disclosed to Commonwealth and State agencies such as the departments of education and the Department of Home Affairs in accordance with VU's obligations under the Education Services for Overseas Students Act 2000 (Cth) (ESOS Act), the National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code) and other applicable legislation. Your personal information will not otherwise be used or disclosed without your consent, unless permitted by law. By completing and submitting this application, you agree to VU collecting, using and disclosing your personal information as described above and in accordance with VU's Privacy Policy and Student Information Privacy Collection Statement (which provides further detail about the types of personal information VU may collect from you and how it is managed) available on the Privacy page on our website vu.edu.au/privacy. You have a right to access your personal information held by VU. If you have any questions regarding privacy, please refer to the [Privacy page](#) on our website, our frequently asked questions at [ASKVU](#) or phone us on 9919 6100 or 1300 VIC UNI (or 1300 842 864).

PRIVACY INFORMATION: We collect and protect your personal information in accordance with our Privacy Policy vu.edu.au/privacy.

CONTACT US

If you have any questions, you can email us at studentadministration@vusydney.edu.au, call us on +61 (07) 3210 7402 (VU Brisbane) or +61 (02) 8265 3222 (VU Sydney) or visit us at our campus locations.

You can find our campus at the following locations:

♦ VU Brisbane: Level 1/269
Wickham St, Fortitude Valley
QLD 4006

♦ VU Sydney: Level
1/160 Sussex St,
Sydney NSW 2000