



International College of Advanced Education

International Student Policy and Procedure Document

CRICOS Provider: 02864B



Payment Extension Request Form

Instructions:

1. This form is for any student enrolled in a CRICOS registered course who wants to apply for a fee payment extension.
2. Please attach any supporting documents to this form, e.g. medical certificates, birth certificates, psychological reports.
3. Any fee payment extension requests will be assessed in accordance with ICAE's Fee Policy and Procedure. Please read this policy document before applying for your extension.
4. This form should be completed in full and returned with supporting documentation to info@thecasinoschool.com. Incomplete forms will not be accepted.

Student Name: _____ **Date of Birth:** _____

Course Start Date: _____ **Student ID #:** _____

Phone Number: _____ **Email:** _____

Reason for Requesting an Extension: Please ensure you have documents to support your statement.

I hereby confirm that this form is complete and correct, I have reviewed ICAE's Fee Policy and Procedure and that information provided in this document is truthful.

Student Signature: _____ **Date:** _____

Office use only:

Extension approved: YES NO Staff Name: _____ Wise.NET Updated: _____

Comments: _____
