

Fee Review Application – Financial Hardship

From time to time, students may find themselves in a state of financial hardship and become unable to fulfil their financial obligations to Lead Institute. Lead Institute will endeavour to assist students in these circumstances to the best of their ability to facilitate a successful outcome to the training in question.

Please ensure that you have read Lead Institute's Fees and Refunds Policy in full before progressing with this application.

Please submit the completed form to Lead Institute's Administration Department as soon as is practical. This information will be kept in the student's file for future reference.

Section A – student to complete	
Personal details	
Date:	Course Name:
Student Name:	Course Start Date:
Student Number:	I have read Lead Institute Fees and Refunds Policy:
Student Address:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Student Contact Details:	Is the course in which you are enrolled subsidised by the government?
H M	<input type="checkbox"/> Yes <input type="checkbox"/> No
E	
<i>Please provide the reasons for the application.</i>	
<i>Please provide a list of evidence that you can submit as part of your application.</i>	
Signature:	Date:
Section B – Lead Institute Chief Executive Officer to complete	
Have the fees been reduced, or a payment plan been introduced?	
<input type="checkbox"/> Yes <i>If Yes, please provide details below.</i> <input type="checkbox"/> No <i>If No, please complete Section C.</i>	

Has the student been informed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Copy placed in student file? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Administration Name:	Chief Executive Name:
Signature:	Chief Executive Signature:
Date:	Date:
Section C – Lead Institute Chief Executive Officer to complete	
Please provide reasons for an amendment being denied:	
Has the student been informed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Copy placed in student file? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Administration Name:	Chief Executive Name:
Signature:	Chief Executive Signature:
Date:	Date: