

AUSTIN COLLEGE ADVICE OF DEPARTURE

Please return to office as early as possible before you leave

STUDENT NO. _____ NEW ADDRESS _____

TITLE _____ NAME _____
(Surname)

(Given Name/Initials)

(PLEASE USE BLOCK LETTERS)

My room _____ at Austin College will be vacant by 10 am from this date
___/___/___.

ONLY COMPLETE BELOW IF YOU DO NOT INTEND TO RETURN TO COLLEGE

I will not be returning to Austin College and hereby wish to finalise my account held in my name at the UNE. I understand that all unpaid charges will be required to be paid within two weeks of leaving college.

Signed _____
(Departing Resident)

Date ___/___/___

The following additional charges or adjustments which have not yet been processed should be taken into account.

Credit adjustments (e.g. remissions, rebates, reversals)	\$ _____ CR
Additional accommodation / / to / /	\$ _____
Damages, repairs, replacements, etc.	\$ _____
Academic Gown(Hire/Sale)	\$ _____

Signed _____
(Authorised Officer)

Date / /