

### APPLICATION FOR FEE INSTALMENT PLAN

#### Applicant's Details

Surname \_\_\_\_\_ Given Names \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Tel \_\_\_\_\_ Student ID \_\_\_\_\_

Email \_\_\_\_\_

#### Fee Instalment Plan

I, the above-mentioned, hereby wish to apply for the fee instalment plan with the Sydney Institute of Traditional Chinese Medicine to pay tuition fees (excluding fees associated with clinic practicum) for **Winter School 2025**.

**Plan A: Please tick** ☐

Payment date 1	09/06/2025
Payment date 2	23/06/2025
Payment date 3	07/07/2025

**OR**

**Plan B: Please tick** ☐

List your payment dates below:

Payment date 1		<b>Payment date 4 must be before (07/07/2025).</b>
Payment date 2		
Payment date 3		
Payment date 4		

I acknowledge and agree that, if this application is approved by SITCM, my fees must be paid in accordance with this plan and that:

- Non-compliance with this scheme may result in suspension from the course and/or the withholding of assessment;
- I will be subject to a \$250.00 late fee if I cannot pay on time.

Signature: \_\_\_\_\_ Date (DD/MM/YYYY): \_\_\_\_\_



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