



## Change of Enrolment Form

Name	Student Number
Course Name	

**NATURE OF CHANGE OF ENROLMENT REQUEST (tick where applicable)**

- Repeat Subject/ Unit
  Early Completion (successfully completed)
- Course Extension
  Change of course
- Deferral/Special Leave
  Others (specify) \_\_\_\_\_
- Drop a Subject (provide reason) \_\_\_\_\_

Please complete for deferral, course extension, change of course or shorten course (early completion)			
Course name/location	Start Date	End date	Action to be taken

Package course Yes  No

Additional Info:

Please complete this section for repeat Units only			
Subject/unit name	Repeat/Drop	Start Date	Price

Repeat without charge

Provide reason



I hereby declare that:

- The information provided on this form is correct and complete.
- I am aware of the impact the change will/may have on their OSHC, and eCoE
- The Fees Policy, Refund Policy and other relevant policies have been made available to me online and I have read, understood and accepted these as conditions of my enrolment.
- I understand that it is my responsibility to ensure that I have met any prerequisites for my chosen subjects.
- I understand that I may be liable for cancellation fees and that I am responsible for paying all fees in full (as per the Fees Policy).
- I understand that it is my responsibility to ensure that I have met any pre-requisites for my chosen subjects.

Full Name:

Student's approval/Signature  Date

For Office Use only

Do the proposed changes result in less than a full time load (100%)?    Yes     No

Has an academic review of application and course structure determined: adding or dropping of subjects may affect course progression    Yes     No

Review of Academic Progress     Satisfactory     Unsatisfactory

Current Attendance     80% or above     Below 80%

DOS/Principal approval/ Signature