Change of Course or Unit Enrollment Form

Full Name: _____ Student ID:_____

Address:_____

Contact number: _____

Leave Type: (please tick appropriate box)

☐ Holiday Leave

☐ Sick Leave

☐ Deferment – please specify reason for deferment:

☐ Suspension – please specify reason for suspension:

_____

_____

Please elaborate on your reason for Leave request:

_____

_____

_____

Please specify the date in which you request to begin and conclude leave:

Start Date: _____ End Date: _____

Length: _____days

Please provide the following in support of your leave request

☐Return ticket

☐Evidence: [explain what type of evidence you have provided]_____

☐Filled Application Form

Are you travelling outside Australia?

☐Yes   ☐ No   If Yes, please specify which country: _____

If Yes, please provide at least one method of contact (email, phone number, postal address)

Person of Contact

Within Australia:

Name:_____ : Phone Number:_____ Relationship: _____

Overseas:

Name:_____ : Phone Number:_____ Relationship: _____

Terms & Conditions

I, _____ hereby understand that as part of the Letter of Offer and Student Agreement, Refund Policy, that it is solely my responsibility to maintain course progress and uphold my Payment Plan payments whilst on leave.

I understand that this suspension or deferment or leave of absence will be reported via PRISMS and may affect my student visa.

....

Applicant's Signature   Date

Office Use Only

Authorisation by the Program Director

I hereby authorise for ....(name)

to _____days leave/deferment.

…………………………………...   …………………………….

Program Director Signature   Date

Approval by President

…………………………………...   …………………………….

President's Signature   Date