

I Change of Enrolment Form

Instructions

- This form is to be used for students who have been enrolled full time by Edinburgh Institute and who are applying for a change of the existing enrolment.
- Incomplete forms will not be accepted.
- Application with no sufficient supporting documents (where applicable) will not be accepted/processed.
- Accurate information must be provided for the College to assess the application and correspond to student.
- The completed form and supporting documents must be submitted to admissions@edinburgh.edu.au.

Please tick the type of enrolment change you are requesting for and complete the sections noted.

Change of course

(Complete Sections 1, 2 & 8)

Change of campus

(Complete Sections 1, 3 & 8)

Deferral/Suspension of studies

(Complete Sections 1,4 & 8)

Withdrawal from studies

(Complete Sections 1, 5 & 8)

Early completion

(Complete Sections 1,6 & 8)

Course extension

(Complete Sections 1, 7 & 8)

Section 1 – Student personal details	
Student ID:	Mobile Number:
Family Name:	Given Name:
Current campus:	Current course:
Email address:	
Address:	
Section 2 – Change of course	
Current course	New course
Last day of study: ____/____/____	

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Reason for request:

Cease of the offering of the course (provider default)

RTO Manager approval Yes No

RTO Manager signature _____ Date _____

Intervention (intervention records to be checked and new study plan to be completed by Academic Director)

Academic Director approval

Yes

No (provide reasons)

Academic Director signature _____ Date _____

Section 3 – Change of campus

Current campus: _____

New campus: _____

Last day of study: ____/____/____

First day of study: ____/____/____

RTO Manager approval

Yes

No (provide reasons)

RTO Manager signature _____ Date _____

Section 4 – Deferral/Suspension of studies

Please read the Edinburgh Institute *Deferring, Suspending and Canceling Overseas Student Enrolment Policy and Procedure* before you lodge the request.

Course name: _____

Course code: _____

Deferral/Suspension from ____/____/____ to ____/____/____

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Date to return to study ____/____/____

Reason for request:

- Cease of the offering of the course (provider default)
- Medical condition preventing from attending class
- Severe personal reasons (traumatic event)
- Return home due to emergency
- Maternity leave
- Others (please specify): _____

Documents to provide:

- Medical certificate
- Return flight ticket
- One way flight ticket
- Other documentations (please specify): _____

RTO Manager approval

- Yes
- No (provide reasons)

RTO Manager signature _____ Date _____

Section 5 – Withdrawal from studies

Please read the Edinburgh Institute *Deferring, Suspending and Canceling Overseas Student Enrollment Policy and Procedure and Fees, Charges and Refund Policy and Procedure* before you lodge the request.

RTO Manager signature _____ Date _____

Section 6 – Early completion

Please note student needs to discuss with the Academic Director before lodge the request. This section needs to be completed by Academic Director on the discussion session.

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Course name: _____

Course code: _____

Original end date ____/____/____

Actual completion date ____/____/____

Reason:

 Student completed course early Other (please specify): _____

Will future enrolment be affected?

 No Yes (New Letter of Offer will be issued and signed Written Agreement must be submitted to admissions@edinburgh.edu.au.)

Academic Director approval

 Yes No (provide reasons)

Academic Director signature _____ Date _____

Section 7 – Course extension

Please note student needs to discuss with the Academic Director before lodge the request. This section needs to be completed by Academic Director on the discussion session.

Course name: _____

Course code: _____

Start date for extension ____/____/____

End date of extension ____/____/____

Number of unit(s) repeating: _____

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Name(s) of unit(s) repeating:

Unit code

Unit name

Reason for extension

- Intervention strategy (Academic Director to check the intervention records)
- Compassionate and compelling grounds (Supporting documents must be submitted)
- Other (please specify): _____

Academic comments by Academic Director:

Academic Director signature _____ Date _____

Section 8 – Student declaration

- I declare that the information supplied by me on all parts of this form is correct and true.
- I understand that any false statement may result in
 - 1) the college notifying DHA about my false claims
 - 2) a charge of breach of discipline or academic misconduct made against me
- I understand that the supporting documents must be submitted at the time of request lodgement.
- I understand the supporting documents I submitted must be true and genuine. The fraud documents may result in the breach of my student visa.
- I understand that the College will notify DHA of the change of my enrolment at Edinburgh Institute and this may affect the validity of my student visa.
- I understand that I must continue to attend class until I am notified of the outcome of my request and failure to attend class will result in being marked absent and affect my course progress.
- I understand that the assessment of my request will be based on the reasons and my supporting documents and on the College policies and procedures.
- I understand if my request is granted for course extension, change of course and change of campus:
 - 1) tuition fees may incur.
 - 2) the duration of my enrolment may be varied.

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- 3) I need to seek advice from DHA about any possible implications for my student visa, for instance, a longer period of enrolment than expected duration may mean that I will need to apply to extend my student visa.
 - 4) my course progress may be affected.
 - 5) my timetable may change.
 - 6) I must return to class when expected. If I do not, my enrolment and CoE will be cancelled as non-commencement and this will put my student visa at risk.
- I understand that I will be issued a new Letter of Offer and a new Written Agreement (WA) for the changes and until the signed WA is received by the Admissions
 - 1) the process of the request will not be finalised.
 - 2) new CoE will not be issued which could lead to my student visa at risk.

Student print name: _____

Student signature: _____

Date: _____

OFFICE USE ONLY

Admissions

Outstanding fees Yes No

If Yes, Amount \$ _____

Admissions Manager comment: _____

Admissions Manager signature: _____ Date: _____

CoE officer

Change processed in SMS Yes No

Change processed in PRISMS Yes No

Student notified Yes No

CoE officer Signature: _____ Date: _____