

CHANGE OF COURSE REQUEST FORM

Please note: Changing your course may affect your academic progress. You may fall behind your schedule and might not be able to complete your course within the period allocated for it. Wells International College will NOT be responsible for any shortcomings in your academic progress caused by your decision to change your course. Please note that the change of course fee is \$200 per application.

STUDENT DETAILS:

First Name:		Family Name:	
Student ID:		Contact Number:	
Address:			
Email Address:			
Course Name:			

COURSE INFORMATION:

Current course details	
Course Offered / Enrolled in:	
Start Date:	/ /
Requested course details	
Requested Course:	
Proposed Start Date:	/ /
Reason(s):	

STUDENT DECLARATION:

I declare that all the information I have given above is correct and complete. I confirm that I have read all the terms and conditions and agree to abide by those rules and any subsequent amendments. If any information is false or has been withheld I accept that this may cause cancellation of my enrolment and/or further consequences.

Student Signature: _____ Date: ___/___/___

OFFICE USE ONLY			
Outcome:	<input type="radio"/> Approved	<input type="radio"/> Not Approved	Comments:
RTO Manager Update:	<input type="radio"/> Yes	<input type="radio"/> No	
Processed By:		Processed Date:	/ /