

Enrolment Variation Form

INSTRUCTIONS:

This form is to be used to request a variation to an existing enrolment and to obtain a new Electronic Confirmation of Enrolment (eCoE).

Please select (x) the variation type below and complete ONLY the sections noted.

- | | | |
|--|--|--|
| <input type="checkbox"/> Deferral / Suspension of Studies
Complete Sections 1, 2, and 7 | <input type="checkbox"/> Change of Course
Complete Sections 1, 4, and 7 | <input type="checkbox"/> Early Completion
Complete Sections 1, 6, and 7 |
| <input type="checkbox"/> Change of Campus
Complete Sections 1, 3, and 7 | <input type="checkbox"/> Course Extension
Complete Sections 1, 5, and 7 | |

Incomplete and/or undocumented applications will NOT be accepted

- Complete all required sections of the form
- Return completed form to the Admissions Officer at Student Reception

IMPORTANT:

- You must be enrolled full time (unless it is your last semester of study)
- Students who are not correctly enrolled will not be processed
- Requests for students with outstanding documents or payment will not be processed until cleared
- Requests for suspension of studies under compassionate circumstances will not be processed without supporting documents
- Your new eCoE will be emailed to your **student email account**

SECTION 1: Student Details

Student No:		Mobile No:	
Family Name:		Given Name(s):	
Email Address:			
Address:			

SECTION 2: Deferral / Suspension of Studies

Please note that if your request is approved and it is more than 3 weeks of the Term, as per College policy, you may be required to repeat the term.

Period of Deferral / Suspension of Studies

Course Name:	
Date From: ___ / ___ / _____	Date To: ___ / ___ / _____
Number of Weeks (Term)	Date to Return: ___ / ___ / _____
Reason for Request:	Documents to provide:
<input type="checkbox"/> Provider Default – College is unable to provide course <input type="checkbox"/> Medical condition preventing from attending class <input type="checkbox"/> Severe personal reasons (traumatic event) <input type="checkbox"/> Return home due to emergency <input type="checkbox"/> Family Reason: _____ <input type="checkbox"/> Maternity leave <input type="checkbox"/> Other (Please specify) _____	<input type="checkbox"/> Not required <input type="checkbox"/> Medical certificate and / or return flight tickets <input type="checkbox"/> Documentation and return flight tickets <input type="checkbox"/> Death/Medical Certificate and return flight tickets <input type="checkbox"/> Medical Certificate <input type="checkbox"/> Other Documentation (please specify below): _____

SECTION 3: Change of Campus

Current Campus:		New Campus:	
Last day of study:		Start date at new campus:	

SECTION 4: Change of Course

Current Course:		New Course:	
Last day of study:		Start date of new course	
Units Completed:		Exemptions Granted:	

SECTION 5: Course Extension (To be completed by academic adviser)

The college may only extend the duration of the student's study where it is clear that the student will not complete the course within the expected duration. This information provided below will be used by CIC to determine the length of time required by the student to successfully complete their program of study.

Course Name for Extension:

Extension Start Date:		Expected completion date:	
No of Units remaining:		Fees Remaining	\$
Name of Units repeating:			
Unit Code	Name of unit		

Reason for Extension

Intervention Strategy Compassionate Grounds Other _____

Academic Comments:

SECTION 6: Early completion (To be completed by academic adviser)

Course Name: _____

Original End Date: _____

Actual completion date: _____

Reason: Student completed course early Other – please specify: _____Dates of future enrolments affected? Yes (new offer letter will be issued & signed agreement submitted) No**SECTION 7: Student Declaration**

- I declare that the information supplied by me on all parts of this form is correct and true to the best of my knowledge.
- I understand that any false statement may result in:
 - the college notifying DoHA about my false claims
 - a charge of breach of discipline or academic misconduct made against me.
- I understand that the supporting documentation must be submitted at the time of request.
- I understand that DoHA will be notified of the change to my enrolment at CIC and this may affect the validity of my student visa.
- I understand that I am required to submit this application BEFORE the requested period commences.
- I understand that I must continue to attend my classes until I am notified of the outcome of my request and failure to attend class will result in being marked absent.
- I understand that the assessment of my request will be based on the reasons and documentation provided by me and CIC's policy and procedure.
- I understand that if my request for change of campus or change of course is approved, I must pay the tuition fees required for the new course and campus.
- I understand that in most cases a request for a deferral/suspension of studies is granted for periods greater than one week.
- Applications for periods of deferral/suspension of studies more than a semester will in most cases not be approved unless exceptional circumstances can be established.
- I understand that College staff will contact me with the College's decision by email.
- I understand if my request for course extension and suspension of studies is approved that:
 - the duration of my enrolment may be longer than my expected original enrolment duration.
 - I need to seek advice from DoHA 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.
 - my course progress may be affected.
 - my timetable may change.
 - I must return to classes when expected. If I do not, my enrolment and CoE will be cancelled and this will put my student visa at risk, and being marked absent which could lead to a breach of student visa attendance requirements.
- I understand that I will be issued a new offer letter for a change of course request and until the signed agreement is submitted;
 - the process of the request will not be finalised.
 - new CoE will not be issued which could lead to my student visa at risk.

Student Signature: _____ Date: ____ / ____ / _____

Office use only

Outstanding fees: <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Amount \$ _____
Request Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Approved by:
Signature:	Date: ____ / ____ / _____

ADMISSIONS OFFICER TO COMPLETE

Processed in TEAMS: Yes No

Processed in PRISMS: Yes No

Student Notified: Yes No

New CoE start date:	____ / ____ / _____	New CoE End Date:	____ / ____ / _____
Total fees on new CoE	\$ _____	Pre-paid course fees	\$ _____

Admissions Signature: _____ Date: ____ / ____ / _____