

Enrolment Variation and Amendment Form

Students should be aware that variation or withdrawal may incur academic and/or financial penalties. Students must discuss any variation or withdrawal with the Academic Manager or Campus Managers. Please refer to the Terms and Conditions of the Application for Enrolment form and the Student Handbook for further advice.

Family Name: _____ **Given Names:** _____

Campus: _____ **Student ID:** _____

Please complete the relevant Section below;

Deferment of Study

Students may only defer a course for a maximum of 12 months.

Course Name: _____ Course Code: _____

Semester Commenced: _____ Completion Date: _____

Intended Year and Semester for Resuming Study: _____

Deferment of Units of Study

Students may only defer units for a maximum of 12 months.

Course Name: _____ Course Code: _____

Semester Commenced: _____ Completion Date: _____

Unit Code: _____ Unit Code: _____

Unit Code: _____ Unit Code: _____

Unit Code: _____ Unit Code: _____

Unit Code: _____ Unit Code: _____

Unit Code: _____ Unit Code: _____

Unit Code: _____ Unit Code: _____

Change of Course of Study

Students wishing to change their course must complete a new enrolment form.

Current Course Name: _____ Current Course Code: _____

Year and Semester Commenced: _____

New Course Name: _____ New Course Code: _____

Intended Completion Date: _____ Total Course Fee: _____

New Unit Code: _____ New Unit Code: _____

New Unit Code: _____ New Unit Code: _____

New Unit Code: _____ New Unit Code: _____

New Unit Code: _____ New Unit Code: _____

New Unit Code: _____ New Unit Code: _____

New Unit Code: _____ New Unit Code: _____

New Unit Code: _____ New Unit Code: _____

Variation to Study Load

Course Name: _____

Course Code: _____

Semester Commenced: _____

Census Date: _____

Unit Added: _____

Unit Added: _____

Unit Added: _____

Unit Added: _____

Unit Added: _____

Unit Added: _____

Unit Deferred: _____

Unit Deferred: _____

Unit Deferred: _____

Unit Deferred: _____

Unit Deferred: _____

Unit Deferred: _____

Withdrawal from Units of Study

Course Name: _____

Course Code: _____

Semester Commenced: _____

Census Date: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Unit Code: _____

Withdrawal from Course of Study

Course Name: _____

Course Code: _____

Semester Commenced: _____

Census Date: _____

Please indicate your reason/s for withdrawing from your studies;

- | | |
|--|---|
| <input type="checkbox"/> Relocation | <input type="checkbox"/> Family Commitments |
| <input type="checkbox"/> Other educational institution offer | <input type="checkbox"/> Work Commitments |
| <input type="checkbox"/> Dissatisfaction with course | <input type="checkbox"/> Dissatisfaction with ABA |
| <input type="checkbox"/> Other (please indicate): _____ | |

Reason/s for Variation

Declaration

I hereby declare that I have read, and understood, the conditions regarding my requested variation to enrolment, and I hereby acknowledge that I am aware, and agree, with any financial and/or academic penalties or liabilities that may arise by virtue of this variation.

Signature of Student: _____ Date: _____

Signature of RFP (if required): _____ Date: _____

Authorised ABA Representative: _____ Date: _____

Office Use Only:

Student Records Adjusted (SSO) _____ (signature) Date: _____

Scan and E-mail to the following: Student Recruitment Manager Campus Manager Academic Manager Accounts