

Name	
DOB	Student number
Phone	
Email	

# **Current enrolment details**

Please give details about the course you are currently studying

Course		
Start date	End date	

# Future enrolments

Please give details of any courses in which you are enrolled in the future.

Course 1	
Course 2	
Course 3	

# **Course variation requested**

Your request will be reviewed. You will be informed if approval is/ is not granted.

Transfer	From this course	
	To this course	
	On this date	
Defer	Original start date	
	New start date	
Suspend	From	
enrolment	То	
Withdraw	Course	
enrolment	Date	
U Withdraw	Course	
application	Date	
Finish early	Date	
□ Start early	Date	
Change campus	Date	
Other		

#### Reason

I request this course variation because

Cambridge Academy of English Pty Ltd t/a Cambridge College Australia (CCA)



# **Evidence / supporting documentation**

I have attached evidence/ supporting documentation

Yes	Documents:
No	Reason:

Note: It is imperative that any change that may affect your visa is discussed with the Department of Home Affairs (DHA) urgently.

# **Student declaration**

I declare that the information in this document is true and correct.

I take full responsibility for this decision and understand that Cambridge College Australia (CCA) will inform the relevant Australian government departments of my decision to change my enrolment. I am aware that I must notify the DHA as a matter of urgency regarding any change to my visa, by visiting a DHA office.

Student's signature		Date
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CCA - OFFICE USE ONLY			
CCA officer	Date submitted		
Recommendation			
Decision			
Authorised by	Date		
(Name, title, signature)			
Refund/ fees payable & details			

All records must be kept in the student file

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