



ESOS 9.1: Changes to Enrolment

Date: _____

Student Name: _____

Student Number: ACE _____

Course & Year: _____

Address: _____

Email: _____

Ph: _____

Please tick which of the following apply:

- Deferral of Course**
- Underloading of timetable**
- Overloading of timetable**
- Leave of absence during semester**

Other:

Please state reason for your above choice of change to your enrolment:

Changes to Enrolment	Version 3.2	Updated: March 2016
Authorised by CEO	CRICOS # 03219A	RTO # 22424
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N.B. Standard 9 of the National Code requires Registered Providers:

- To monitor the enrolment load of students at all times to ensure they are able to complete the program within the duration specified on their Confirmation of Enrolment (CoE);
- Only extend the duration through the issuing of a new CoE in limited circumstances.

Changes to Course Length

Please state how many months your change to enrolment will add to the satisfactory completion of your course: _____

Original Course Length: _____

Approval by Course Coordinator

Please state date of intervention meeting with student: _____

Comments:

Signature of Course Coordinator: _____

Date: _____

Approval by Chief Executive Officer (CEO)

I _____ approve and authorise the following change/s to
_____ enrolment in their course of study

Signature of CEO: _____ Date: _____

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A confirmation letter will be forwarded to student regarding changes to their enrolment once the details have been processed by the Office.

Office Use Only

Staff Member Name:		Date Recorded on Student management system:	
Signature:		Date Confirmation sent to Student:	
Date Entered to DE:		Date recorded on PRISMS:	