

NOTE. - A \$200 administration fee will be applied to process this request.
 - 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. The Institute will NOT be responsible for any shortcomings in your academic progress caused by your decision to change your course.

STUDENT DETAILS

First Name	<input type="text"/>	Student ID	<input type="text"/>
Middle Name	<input type="text"/>	Contact Number	<input type="text"/>
Last Name	<input type="text"/>	Date of Birth	<input type="text"/>
Address	<input type="text"/>		
E-mail Address	<input type="text"/>		

COURSE INFORMATION

CURRENT COURSE DETAILS

Course Enrolled	<input type="text"/>
Start Date	<input type="text"/>

REQUESTED COURSE DETAILS

Requested Course	<input type="text"/>
Proposed Start Date	<input type="text"/>
Reason(s)	<input style="height: 60px;" type="text"/>

DECLARATION

I declare the information I have giving on this application by me is true, correct and accurate, and that I have read and understood the Institute's policies and procedures. If I knowingly make any false or misleading statements, I may be liable for prosecution.

Student's Signature Here.	Date: _____
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OFFICE USE ONLY

Application Checked:	<input type="radio"/> YES	<input type="radio"/> NO
Admin Fee Received:	<input type="radio"/> YES - amount \$ <input type="text"/>	<input type="radio"/> NO
Assessed by:	<input type="text"/>	
Position:	<input type="text"/>	

Signature Here.	Date: _____
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OUTCOME

APPROVED REJECTED

Comments

Decided by: _____	Date: _____
Signature Here.	