Level 8, 22 Market Street Sydney NSW 2000 Australia

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CHANGE OF COURSE TIMETABLE FORM

STUDENT DETAILS			
First name:		Family Name:	
Student ID:		DOB:	
Passport Number:		Visa Type:	
Course Enrolled:		Commencement Date:	
Postal Addr	55:		
Contact Number:		E-mail:	
		be approved if there are places available. For more	
Change of Timetable Administration fee \$50			
From		to	
Reason: (It must be specific)			
Students Si	nature:	Date:	
OUTCO	E		
Appro	_	cted	
Decid	 d By:	Date:	
		· · · · · · · · · · · · · · · · · · ·	
PAYME	Т		
Total:	Received By:	Date:	