

F09 Course Change Request Form

STUDENT DETAILS			
Full name			
Current address			
Date of Birth			
Phone number			
Email address			
CoE details			
Course to be changed			
Reason for change			
PREFERRED COURSE			
Select course	CRICOS code	Course code and title	Estimated course duration
	098753D	BSB51918 Diploma of Leadership and Management	52 Weeks
	092271D	BSB61015 Advanced Diploma of Leadership and Management	52 Weeks
	098648E	BSB50618 Diploma of Human Resource Management	52 Weeks
	087607E	BSB60915 Advanced Diploma of Management (Human Resources)	52 Weeks
	097156M	SIT30816 Certificate III in Commercial Cookery	64 Weeks
	097158J	SIT40516 Certificate IV in Commercial Cookery	87 Weeks
	097160D	SIT50416 Diploma of Hospitality Management	83 Weeks
	097173K	SIT60316 Advanced Diploma of Hospitality Management	102 Weeks
STUDENT DECLARATION			
I hereby declare and certify that the information supplied by me on all parts of this form is complete and true in all aspects			
Student Signature			Date

Office Use Only			
Received by			Date:
Remarks:			
Is the change approved	Yes / No	Approval staff member	
Is the new offer created?	Yes / No / NA	Is the new acceptance signed	Yes / No / NA
Has SMS been updated?	Yes / No / NA	Has accounts updated?	Yes / No / N/A
Has PRISMS been updated?	Yes / No / NA	Has the student been informed?	Yes / No
Processing staff			Date
		Signature	