

## COURSE VARIATION REQUEST FORM

Section A: Student Details			
First Name		Family Name	
Contact Number		Student Number	
Date Of Birth		Contact Email	
Address			

Section B: Agent Details			
Company		Agent Name	
Contact Number		Contact Email	

Section C: Currently enrolled Course(s) – Maximum three (3)						
Number	Course Code	Course Name	Campus	Start of Study	Close of Study	Tick which courses you want to vary
#1						
#2						
#3						

Section D: Variation Request (tick relevant options)			
Request Type		Reason	
Cancellation		Compassionate/Compelling circumstances	
Deferral		Transferring to another provider	
Suspension		Course Progress/Intervention Strategy	
Extension		Personal decision	
Course change (Complete Section E)			
Provide a full background and explanation of your reason in the space below			

**CHARLTON BROWN. COURSE VARIATION REQUEST FORM (CONT)**

<b>Section E: New Course Selection (for course change request)</b>						
Course Code	Course Name	Campus	Start of Study	Close of Study	Tick which courses you want to vary	

<b>Section F: Evidence Register</b>		
<b>Note: If no evidence is attached, your request will <u>not</u> be considered</b>		
Title of document	Reason for inclusion	Check by internal staff

**Terms and Conditions**

All course variation requests will be assessed in line with Charlton Brown’s publicly available policy on Deferring, Suspending, Extending or Cancelling International Student Enrolments. This request form must be accompanied by supporting evidence to support the reasons for making the request.

I understand that:

- Changes to enrolment will incur a fee
- If outcome is Not Yet Competent after paid attempt. I will need to enrol in the unit again
- The application may require up to seven (7) days to be processed.
- If changing courses, the application will not be finalised until Charlton Brown receives all required further documents (e.g., new signed Letter of Offer) within 14 days.
- I will receive a written response outlining the approval or rejection of this request.
- Approval of this request may result in a variation to my confirmation(s) of enrolment.
- No suspensions or extensions can be approved for a period of more than four (4) months, even if accompanied by compassionate/compelling evidence; if the request is for longer than four (4) months, I will be required to undergo a re-enrolment process.
- I have accepted all terms and conditions as stated above and in the student handbook.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please return your completed for to: [studentservices@charltonbrown.edu.au](mailto:studentservices@charltonbrown.edu.au)

Internal office only: Print Name (Staff): _____ Staff Members Signature: _____ Date: ____ / ____ / ____
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