## **Enrolment Variation Form**

| First Name:                      | Last Name:                                   |
|----------------------------------|--|
| Student ID Number:               | Contact Phone Number:                        |
| Program:                         |  |
| WISH TO CHANGE MY UNIT ENROLMENT | FOR: CHANGING FROM FULL-TIME TO PART-TIME:   |
| o Trimester 1                    | • <b>No</b>                                  |
| o Trimester 2                    | <ul> <li>Yes, change to full-time</li> </ul> |
| <ul> <li>Trimester 3</li> </ul>  | <ul> <li>Yes, change to part-time</li> </ul> |
| INIT WITHDRAWALS                 | Unit name                                    |
| INIT ADDITIONS                   |  |
| Init code                        | Unit name                                    |
|                                  |  |

| Please select the most relevant reason/s for your decision to vary your enrolment: |                                       |   |   |  |  |  |  |  |
|--|---------------------------------------|---|---|--|--|--|--|--|
| 0  | On advice of the lecturer             | 0 | Health problems                             |  |  |  |  |  |
| 0  | On advice from a medical practitioner | 0 | Work obligations                            |  |  |  |  |  |
| 0  | Family obligations                    | 0 | Dissatisfaction with the course or Collarts |  |  |  |  |  |
| 0  | Financial difficulties                | 0 | Other                                       |  |  |  |  |  |

If other selected above please detail briefly below

## AUTHORISATION

I understand that I will remain liable for all unit enrolment fees, as outlined on my Commonwealth Assistance Notice (CAN), if this form is not received by Collarts by the relevant trimester census date. Students studying less than a 75% study load are unlikely to receive Centrelink payments. For students to remain eligible for Centrelink, they must be enrolled in 75% of a full-time study load. This is equivalent to 18 credit points per trimester at Collarts. Please contact Centrelink before making any decisions about reducing your study load

| <b>.</b> | <u>.</u>   |
|----------|------------|
| Student  | Signature: |

Date:

Program Leader Signature:

Date:

## **OFFICE USE ONLY**

| Staff Name: | 0 | Approved | <ul> <li>Profile Updated</li> </ul> | 0 | Notification Sent |  |
|-------------|---|----------|-------------------------------------|---|-------------------|--|
|             | 0 | Declined |                                     |   |                   |  |