

## Application for Change of Program

PERSONAL DETAILS				
Student ID Number			Family Name	
Given Name(s)				
Email				
Address				Post Code
Date of Birth			Phone Number	
Are you an International student?	Yes	No	Citizenship	
Are you sponsored?	Yes	No	Sponsor	

CHANGE OF PROGRAM					
Current program/package		<ul> <li>The University of Adelaide</li> <li>UniSA</li> </ul>			
New Eynesbury program		Commencing semester			
New University Program		<ul> <li>The University of Adelaide</li> <li>UniSA</li> </ul>			
Please advise the reason for change:					

PLEASE READ AND ACKNOWLEDGE							
I understand that:							
□ I may be required to discuss this change with an academic staff member							
An electronic confirmation of enrolment (ecoe) will be forwarded to me via email and that I must present this to Immigration so that my student visa can be updated if required.							
□ My tuition fees must be paid prior to commencement. I understand that a change of program request will not be processed until I sign an acceptance and all fees are finalised.							
□ It is my responsibility to ensure	that I am enrolle	d in courses according to my new p	rogram structure.				
I agree to abide by Eynesbury College's refund policy and other policies, procedures and conditions related to this change.							
Where a request is made during	a semester, a ch	hange may not take effect until the	next intake.				
□ I understand that I must remain	$\Box$ I understand that I must remain enrolled in my current program until official approval is received.						
Parent or Manager SSU			Date				
Student Signature	Date						
******Parent or Manager SSU to sign if the student is under 18****							
ACADEMIC DIRECTORATE /ACADEMIC MANAGER							
Pre requisite subjects checked and advised Yes 🗆 No 🗆							
Academic Penalty (Diploma) if applicable Yes 🗆 No 🗆 Grade applied (Diploma) :							
Approval granted	Yes □ No □	Effective From / /					
Approved by:		Signature	Date				
Notes:							

## LODGEMENT DETAILS

In person: Student Services, Ground Floor Coglin Street Campus

## via email: studentservices@eynesbury.sa.edu.au

PROGRAM SUPPORT					Date Com	pleted	Initial
□ Check student has provided supporting documents (if applicable)							
□ Check if student is sponsored; if so, contact sponsor for approval							
□ Check MAZE Progression and send request for new offer (if applicable)				licable)			
Notify the students parent and/or agent (if under 18)							
□ Check students finances; refer to Finance as required							
□ Check PRISMS; notify Immigration as required							
□ issue new ecoes/change existing ecoe as required							
□ Notify University/Partner Institution (if applicable)							
Notify student via email/add MAZE note if required							
Comments:							
PROGRAM SUPPORT Sign Off							
PSO	Name		Signature			Date	
SSU Manager	Name		Signature			Date	

FINANCE OFFICER – if applicable						
Is the student eligible for a refund?				No		
Tuition		Comm	ents:			
At \$ Week	\$					
Less %	\$					
TOTAL	\$					
OSHC	\$					
Other	\$					
TOTAL REFUND	\$					
Has the student filled out req	uest for refund form?	Yes		No		
Signed					Date	