

IMAGINE EDUCATION AUSTRALIA

EDUCATION CENTRE Phone: +61 7 5552 0900

13 Benowa Road Southport

ABN: 27 620 585 615

APPLICATION TO CHANGE COURSE

USE: This form is to be used if a student wishes to cancel a current enrolment and begin a different course at Imagine. [eg. GE \Rightarrow IELTS] OR [CIII Hospitality \Rightarrow CIII Automotive] Conditions apply.

STUDENT NAME:			STUDENT #				
EMAIL ADDRESS:			Is the student SVP? Yes / No (Please Circle)				
CURRENT COURSE:			CLASS: SESSION:				
Current Course START DATE:			Current Course END DATE:				
How long is your course? (Number of weeks)			Weeks				
Domestic Student			YOU WILL BE CHARGED \$75 (Processing Fee)				
			(more than 1 course change will incur an				
			additional \$35 processing fee per course change)				
Type of Visa:							
☐ Tourist Visa			YOU DO NOT REQUIRE A NEW CoE				
☐ Working Holiday Visa			YOU WILL BE CHARGED \$75 (Processing Fee)				
☐ Other (Please specify)			(more than 1 course change will incur an				
			additional \$35 processing fee per course change)				
☐ Student Visa			YOU WILL REQUIRE A NEW CoE				
NOTE: IT IS YOUR RESPONSIBILITY TO MAINTAIN A			YOU WILL BE CHARGED \$75 (Processing Fee)				
CURRENT STUDENT VISA AND OSHC.			(more than 1 course change will incur an				
			additional \$35 processing fee per course change)				
I wish to NEW COURSE			CLASS: SESSION:			<u> </u>	
CHANGE	THE TO COUNTY		3233101				
To →							
START DATE:			END DATE:				
REASON:			VISA END DATE:				
REASON.			VISA LIND DATE.				
COUNSELLING BY COURSE TRAINER:							
STUDENT SIGNATURE:			TODAY'S DATI	ATE: / /			
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FOR OFFICE USE ONLY							
Received by:				Date Rec		/ /	
General Manager: CHANGE Approved / Declined (Please circle)		Date: / /		Signature	e :		
Reason (if declined)							
Ezi-Debit in PEPI						l No	
1st Enrolment edited and finished in PEPI		Date: / /		Signature:			
Actioned in PEPI		Date: / /		Signature:			
Actioned in PRISMS		Date: / /		Signature:			
Accounts transferred and processed		Date		Signature			
Student Visa/Non-Student Visa/Domestic							
Student → \$7							
Student / Trainer / Agent /		Date	: / /	Signature	e:		
Account Manager advised:							

IMAGINE EDUCATION....Investing in imaginations

Date:

Signature:

WWW.imagineeducation.com.au
CRICOS Provider No: 02695C
National Provider Number 31302

Timetable Updated