



IMAGINE EDUCATION AUSTRALIA

EDUCATION CENTRE

13 Benowa Road Southport

Postal: PO Box 4931, Bundall, Qld 4217

ABN: 27 620 585 615

Phone: +61 7 5552 0900

E-mail: info@imagineeducation.com.au

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 → IELTS] OR [CIII Hospitality → 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)		<input type="text"/> 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: <input type="checkbox"/> Tourist Visa <input type="checkbox"/> Working Holiday Visa <input type="checkbox"/> Other (Please specify)		YOU DO NOT REQUIRE A NEW CoE YOU WILL BE CHARGED \$75 (Processing Fee) (more than 1 course change will incur an additional \$35 processing fee per course change)	
<input type="checkbox"/> Student Visa NOTE: IT IS YOUR RESPONSIBILITY TO MAINTAIN A CURRENT STUDENT VISA AND OSHC.		YOU WILL REQUIRE A NEW CoE YOU WILL BE CHARGED \$75 (Processing Fee) (more than 1 course change will incur an additional \$35 processing fee per course change)	
I wish to CHANGE To →	NEW COURSE	CLASS:	SESSION:
START DATE:		END DATE:	
REASON:		VISA END DATE:	
COUNSELLING BY COURSE TRAINER:			
STUDENT SIGNATURE:		TODAY'S DATE: / /	

FOR OFFICE USE ONLY			
Received by:		Date Received:	/ /
General Manager: CHANGE Approved / Declined (Please circle)	Date: / /	Signature:	
Reason (if declined)			
Ezi-Debit in PEPI	<input type="checkbox"/> Yes (if yes, give form to SPO) <input type="checkbox"/> No		
1 st Enrolment edited and finished in PEPI	Date: / /	Signature:	
Actioned in PEPI	Date: / /	Signature:	
Actioned in PRISMS	Date: / /	Signature:	
Accounts transferred and processed Student Visa/Non-Student Visa/Domestic Student → \$75 charged	Date: / /	Signature:	
Student / Trainer / Agent /	Date: / /	Signature:	



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CRICOS Provider No: 02695C

National Provider Number 31302



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Account Manager advised:			
Timetable Updated	Date: / /	Signature:	



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