



Request for Change of Program

Family Name: _____ Student ID: _____
Given Name: _____ Course Enrolled: _____
Email Address: _____ Contact #: _____

Please complete the required information for your request below;

Request for Part-time study *Number of Subject:* _____

International students are required to undertake a full time study load due to Department of Immigration regulations.

Request for Credit Overload

Students must have a CGPA of 3.00 or above to be eligible for Credit Overload.

Request for Unit of Study Withdrawal

I request to withdraw from (subject name) _____ effective immediately.

Students who withdraw from a subject after Census date will receive a Fail Withdrawn (FW) grade on their Academic transcript and will be required to pay for the subject.

Request for Program Change

Current Program: Diploma Associate Degree BBA (MQ) Bachelor (ICMS)
New Program: Diploma Associate Degree BBA (MQ) Bachelor (ICMS)

Request for Deferral

Deferral period (Term Date): _____ to _____

Date of deferral effective: _____ Date of re-commencement: _____

Reason for Deferral: _____

International students are only eligible to defer for one term in the instance of extenuating circumstances. Documentation must be provided upon application.

Comments: _____

Student signature: _____ **Date:** _____

Office Use Only:

Approved Declined Signature: _____