



WINDSOR INSTITUTE OF COMMERCE

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Change of Course Request Form

- Please note changing your course may affect your academic progress. You may fall behind your schedule and might not be able to complete your course within the period allocated for it. Windsor Institute of Commerce will NOT be responsible for any shortcomings in your academic progress caused by your decision to change your course.

Student Personal Details:			
Student ID:		Course:	
Family Name:		Given Name:	
Contact Number:		Email:	
Address:			

Course Information:	
Current Course Details	
Course offered/enrolled in:	
Start date:	/ /
Requested Course Details	
Course applying for:	
Propose start date:	/ /
Reason:	

Declaration
<p>I declare that all the information I have given above is correct and complete. I confirm that I have read all the terms and conditions and agree to abide by those rules and any subsequent amendments.</p> <p>If any information is false or has been withheld I accept that this may cause cancellation of my enrolment and/or further consequences.</p> <p>Student Signature: _____ Date: ___/___/___</p>

Office Use Only			
<input type="checkbox"/>	Approved	<input type="checkbox"/>	Not Approved
Name:		Signature:	Date: / /
Comments:			