

Change Of Session Form

SECTION 1 – Personal details

Student number: _____

Email address: _____

Family Name: _____

Given Name: _____

Date of Birth: _____

Mobile Phone: _____

Mailing address: _____

Agent Name: _____

 I understand that if it is required to make any changes to my change of session request form after I have submitted the form an administration fee of \$50.00 will apply. I understand the change request to a higher-price session will incur payment of the price difference I understand the change request to change to a lower-price session will not incur refund or credit for the price difference I understand changes requested by Thursday, will be processed for the following week I understand an approval will depend on availability

Student's Signature:

Signature_____
Date

SECTION 2 – Please list your current level and the level you wish to change to.

Current level: _____

- Current Session:

 Day Evening Fast-Track

- New Session:

 Day Evening Fast-Track

OFFICE USE ONLY – this section is to be signed by a Gold Coast Learning Centre Staff Member once the session change has been approved.

Compliance Officer (print name)_____
Signature_____
Date

SECTION 3 – Student declaration (please tick)

I declare that by signing this form I understand that:

 On receipt of this form, Gold Coast Learning Centre will withdraw me from the session I have listed in this form. I understand I can request up to **2 Changes of Session** My attendance is satisfactory I understand Change of Session incurs a fee of \$50 on top of any outstanding fees.