



Add or Change Education Agent - Pre-Masters Program

Please email this form directly to admissions@unswcollege.edu.au.

STUDENT DETAILS: (Please use CAPITAL letters)

Student ID Number	Date of Birth (dd/mm/yyyy)	Are you under 18 years old?	Yes	No
<input type="text"/>	<input type="text"/>	Are you a sponsored student?	Yes	No
Family Name	Given Name		<input type="text"/>	
Postal Address				
<input type="text"/>				
Telephone	Mobile	Fax	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

ENROLMENT DETAILS:

Course	Intake/Term/Year	Class Group
<input type="text"/>	<input type="text"/>	<input type="text"/>

NEW AGENT:

Agent Name	Branch/Location
<input type="text"/>	<input type="text"/>

REASON FOR CHANGE: (Please attach extra documentation if needed)

STUDENT DECLARATION:

- I hereby certify that the information I have provided on this form is correct and true.
- I hereby consent to UNSW College contacting my Previous Agent to notify them that I have discontinued their services.
- I understand that my decision to change Education Agent is final and that all correspondence concerning my application and enrolment will now be through my newly appointed Agent, effective from receipt of this form by UNSW College.
- I hereby consent to UNSW College communicating with my new Education Agent in relation to my enrolment with UNSW College and UNSW Sydney and any changes to my planned course of study. This includes changes to my enrolment such as repeats, withdrawals, releases and enrolment in an alternate program.
- This consent is granted for the period of my enrolment with UNSW College and UNSW Sydney (as set out in my Confirmation of Enrolment) or until I notify you that I have ceased to use my nominated Education Agent, whichever is earlier.

Student's Signature

Parent/Guardian's Signature (if student is under 18 years of age)

Date (dd/mm/yyyy)

OFFICE USE ONLY	
Received by:	Date:
Admissions and Enrolment:	Evidence attached, if required: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Tuition fees received? (if Yes, refer to GNR)	Regional Manager:
<input type="checkbox"/> Date Regional Manager notified: _____	Approve / Reject (please circle as appropriate)
<input type="checkbox"/> Date Regional Manager's decision received: _____	By: _____ Date: _____
<input type="checkbox"/> Records updated by: _____ Date: _____	Comment:
<input type="checkbox"/> Email Accounts for commission purposes: _____	