

Deferral or Change Course - Before Starting Your Course Pre-Masters Program

Student ID Number	Date of Birth (dd/mm/y		inder 18 years old?	Yes No Yes No	
- amily Name	ne		Are you a sponsored student? Yes No Given Name		
Postal Address					
Suburb	State	Postcode	Postcode Country		
CURRENT OFFER DETAILS	 S:	1	'		
Course		Intake/Te	Intake/Term/Year		
CHANGE REQUESTED: (P.	lease choose option A or B)				
A. Late Arrival: I wish to start n		start my course la	ny course late on:		
B. Change of Intake:	New Into I wish to New Into	I wish to defer my current course to a later intake: New Intake/Term: I wish to change my current course to an earlier intake: New Intake/Term: Year: I wish to shorten or extend my English program to weeks.			
course code		ode:	ge my intended undergraduate program to: course name: ge my stream of study from: to		
Reason for Change: (Please tick one box.) Visa not gra Visa not gra Other					
Student to explain and att	ach evidence:				
If you tick any boxes above, you must	have your parent/guardian sign this form (if	under 18 years old) or attac	ch a letter from your sponsor (if a schola	arship student) supporting your reques	
DECLARATION					
 I understand that this will be issued. I accept that the cour and that any addition 	request is subject to UNSW C se structure and course fees o al fees must be paid before a be notified of any changes to r	of the new progran new CoE can be is	n may differ from the cours sued.	se originally offered to me	
Student's Signature	Parent/Guardia	n's Signature (if stud	ent is under 18 years of age)	Date (dd/mm/yyyy)	
OFFICE USE ONLY					
Received by:	Date:	Evidenc	e attached:	□ Yes □ No	
Late arrival approved:	□ Yes □	No Notify A	Notify AC and DP if approved after wk 4 $\ \square$		
Approved by:	Date:	Notes: A ne	Notes: A new financial guarantee is required if the student is sponsored		