

Student Request to change Study Load Form

(This form **MUST** be used before permitting a study load change)

SFV –VTG STUDENT FEE FOR SERVICE STUDENT INTERNATIONAL STUDENT

Student Details

Student ID:

Family Name:

Given Name:

Course Details

Course Name: Course Code:

Please tick the study load you wish to change to:

Full time Part time Extra Time table

Student Declaration

I confirm that it is my request to change my study load. I also understand that by changing my study load my current time table and course delivery will be affected. I also understand that I am required to register for a new time table and will receive a revised training plan. If I have chosen an extra time table I confirm I have been notified by the Institute about the possibility of over exhaustion. I agree to studying more hours than required.

Student Signature: Date: / / 20.....

FOR OFFICE USE

Date of submission: Student Support Officer Signature:

Please gain approval (only applicable to Extra time table selection):

Finance Approval:

Please tick:

Revised Training Plan provided to student Update SMS

Comments:
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