



ECoE Change Form

Section 1 – Student Details

Student Name:

Student ID:Date of Birth:

Address:

Contact Number (H):Mobile:

Email Address:

Section 2 – ECoE Details

ECoE to be Changed ECoE Number's:

Reason for ECoE Change:

Preferred Course and Intake

Tick	Course Code and Description	CRICOS Code	Course Duration (Weeks)	Current Intake	New Intake
<input type="checkbox"/>	SIT30816 - Certificate III in Commercial Cookery	091905E	52		
<input type="checkbox"/>	SIT40516 - Certificate IV in Commercial Cookery	091906D	78		
<input type="checkbox"/>	SIT50416 - Diploma of Hospitality Management	091913E	70		
<input type="checkbox"/>	SIT60316 - Advanced Diploma of Hospitality Management	091914D	92		
<input type="checkbox"/>	BSB40520 - Certificate IV in Leadership and Management	106803F	40		
<input type="checkbox"/>	BSB51915 - Diploma of Leadership and Management	094526C	52		
<input type="checkbox"/>	BSB50420 - Diploma of Leadership and Management	104633B	52		
<input type="checkbox"/>	BSB61015 - Advanced Diploma of Leadership and Management	091350B	52		
<input type="checkbox"/>	BSB60420 - Advanced Diploma of Leadership and Management	107072F	52		
<input type="checkbox"/>	BSB80120 - Graduate Diploma of Management (Learning)	107073E	52		

Section 3 - Student Declaration

I hereby declare and certify that the information supplied by me on all parts of this form is complete and true in all aspects.

Signature:Date:.....



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CRICOS No: 03483G | RTO No : 40794

For office use only

Section 4– Australian Study Link Institute

(All sections to be completed by a delegated officer)

Officer Name:

Units Required for Completion.....Expected Completion Date.....

Signature:Date:

Section 5 - Administration Office

Did the ECoE changes reflect student fees:

(If yes, student needs to sign up a new student agreement)

New ECoE Number's:

Signature:Date: