



ECOE Change Form

Student's Personal Details			
Full Name:			
Student ID:		Date of Birth:	
Address:			
Phone no:			
Email ID:			

Select required Course and Intake for variation.

Tick	Course Code and Description	Course Duration (Weeks)	Current Intake	New Intake
<input type="checkbox"/>	BSB40520 Certificate IV in Leadership and Management {106803F}	40		
<input type="checkbox"/>	BSB50420 Diploma of Leadership and Management {104633B}	52		
<input type="checkbox"/>	BSB60420 Advanced Diploma of Leadership and Management {107072F}	52		
<input type="checkbox"/>	BSB80120 Graduate Diploma of Management (Learning) {107073E}	52		
<input type="checkbox"/>	CHC33021 Certificate III in Individual Support {120964E}	56		
<input type="checkbox"/>	CHC43315 Certificate IV in Mental Health {120965D}	40		
<input type="checkbox"/>	CHC43121 Certificate IV in Disability Support {120966C}	38		
<input type="checkbox"/>	CHC52025 Diploma of Community Services {120967B}	94		
<input type="checkbox"/>	SIT30821 Certificate III in Commercial Cookery {109844F}	56		
<input type="checkbox"/>	SIT40521 Certificate IV in Kitchen Management {109502F}	92		
<input type="checkbox"/>	SIT50422 Diploma of Hospitality Management {112633B}	64		
<input type="checkbox"/>	SIT60322 Advanced Diploma of Hospitality Management {112634A}	92		



AUSTRALIAN STUDY LINK INSTITUTE

Level 2, 123 Lonsdale St
Melbourne, VIC 3000, Australia
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CRICOS No: 03483G | RTO No : 40794

Reasons for Variation:

- Medical Grounds
- Work Commitments
- Early Finish
- Staff/Admin Error
- Compelling/compassionate Reasons
- Financial Circumstances
- Intake change
- Others; Please mention the reason in detail:
- Transferred to another course
- Visa Cancellation
- Change of location/Campus change

Documents attached:

- Medical Certificate
- Others; please specify
- Travel Documents
- Mails
- Supporting certificates

Students Declaration:

I understand that variation of CoE may result in extension of my course duration and an extended CoE. I also understand that this variation may affect my student visa and I may need to seek advice from the Department of Home Affairs (DHA) on the potential impact on my student visa. I am aware that a change in my COE may also result in the change of my fees.

- I have been advised of all the relevant consequences of the outcome of my request.
- I have been advised of all the relevant information in relation to the request made on this form.
- I am aware of my right to appeal.
- I understand that if my request is approved, ASLI will notify the Department of Home Affairs via PRISMS, and this may affect my student visa status.

Student Signature:		Date:
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Office use only: (All sections to be completed by a delegated officer)

Authorised person approval	Name:			
	Signature:		Date:	
Decision of Request	<input type="checkbox"/> Granted <input type="checkbox"/> Not Granted			
Student Management System updated including PRISMS	Yes		No	
Did the ECoE changes reflect student fees: (If yes, student needs to sign up a new student agreement)	Yes		No	
Student notified	Yes		No	
New ECoE Number:				



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Course Adjustment (If required):

Comments (If any):