

Student Course Variation Form

Student Name		Student ID	
Current Enrolled Course			
Start Date		End Date	
Future Courses			

Deferment

From _____ To _____

Will you be in Australia? Yes No

Reason (Please provide as much details as possible)

Support Documents

Course Change at Highgate International College

From _____ To _____

STUDENT VARIATION FORM
Version 1.0 May 2024, Approved: CEO

The last day of study at current course _____

Reason (Please provide as much details as possible)

Withdrawal

The last day of study at current course _____

Are you going to transfer to another provider? Yes No

*Please note that you must complete the 1st 6 months of your principal course to be able to transfer to another provider

Reason (Please provide as much details as possible)

Support Documents

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Cancellation initiated by Highgate International College

Reason

Other

Declaration

I declare the information I have given on this application by me is true, correct and accurate, and that I have read and understood the College's policies and procedures.

Signature _____ Date _____



Office Use Only

Received by _____

Date _____

Outcome Approved

Disapproved

Approved by _____

Signature _____

Date _____

Note

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Highgate International College Pty Ltd t/a Highgate International College
Provider Code: 45710 | CRICOS Code: 03927F