

# Enrolment Amendment Form



**MELBOURNE**  
INSTITUTE OF TECHNOLOGY

Use this form to add or delete unit/s from your enrolment.

**Return form to:**

**Office of Student Services and Engagement**

Melbourne Institute of Technology, Level 2M, 288 La Trobe St, Melbourne VIC 3000, Phone: +61 3 8600 6700 Fax: +61 3 9010 0999,

Email: [enrolments@mit.edu.au](mailto:enrolments@mit.edu.au)

MIT Sydney, Level 7, 154-158 Sussex Street, Sydney, NSW 2000, Phone: +61 2 8267 1400 Fax: +61 3 9010 1004,

Email: [enrolments.syd@mit.edu.au](mailto:enrolments.syd@mit.edu.au)

Personal Details					
Are you a new student <input type="checkbox"/> or a continuing student <input type="checkbox"/>			Student ID: MIT <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Family Name			Given Name:		
Date of Birth:			Telephone:		
Course Name:			Course Code:		
Are you an international student holding a student visa? <input type="checkbox"/> Yes <input type="checkbox"/> No					
<i>Please note International Students on a student visa are required to enrol in a full-time load (usually 60 credit points or 4 units per trimester), to comply with their visa conditions. If you wish to reduce your study load due to extenuating circumstances, you must seek approval from your Head of School.</i>					
Unit/s to be Deleted					
Trimester/Year ( e.g. 2/2018)	Unit Code	Unit Name	School Approval		
			Yes	No	Head of School Signature
Unit/s to be Added					
Trimester/Year ( e.g. 2/2018)	Unit Code	Unit Name	School Approval		
			Yes	No	Head of School Signature
Head of School Comments (e.g. pre-requisite waiver approval, reduced study load approval)					
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Student Declaration					
<p>I authorise the Office of Student Services and Engagement to amend my enrolment as indicated, effective from the date this form is lodged. I agree that the date of amendment will be taken as the date this form is lodged to the Office of Student Services and Engagement at Melbourne Institute of Technology. I understand that I will not be entitled to a refund or credit of any fee, if this form is lodged after the relevant census date. I acknowledge that I am bound by the rules and regulations of Melbourne Institute of Technology. I understand that the information contained in this form shall be treated by Melbourne Institute of Technology as confidential and may be made available to the Commonwealth and State agencies and the Fund Manager of ESOS Assurance Fund, pursuant to obligations under ESOS Act 2000 and National Code.</p>					
Student Signature:			Date:		
Office Use Only					
Initial:		Date Received :		Date Processed :	