

## **Early Completion Request Form**

Student to complete the following sections:

Student ID				
Student Name				
Current Course				
Visa Sub Class				
Requested Completion Date				
2) Your request for early complet	requirements to be eligible for early completion on is subject to approval by your course coordinator lications on your student visa and you should seek appropriate advi	ce before changing the course		
Reason(s) for Early Completion of the Course (Please provide as much details as possible) Note: Attach any supporting documents with this form as applicable				
I give permission for my CoE to be amended, if required, should my request be approved and understand that there may be an implication on my student visa which is my responsibility to contact the Department of Home Affairs (DHA).				
Student Signature		Date:		
ADMIN use only				
Early Completion	Granted			
	Declined			

		Declined	
Comments from Student Interview			
Reason(s), if Declined			
Follow-up Action			
Approved by	Course Coordinator		Date:
	Academic Manager		Date: