

EDUCATION ACCESS (AUSTRALIA) PTY LTD

A.B.N.45 101 976 596

17-35 Abbotsford St, West Melbourne, Victoria 3003 Australia

Postal Address: PO Box 876, North Melbourne, Vic 3051 Australia

TEL: + 613 9654 3433

Fax: + 613 9654 3455

Email: info@eaa.edu.au

Website: www.eaa.edu.au



APPLICATION FOR CHANGE OF COURSE - INTERNATIONAL

Personal Details

Student ID:		Date of Birth:	
First Name		Surname:	
Address:			
State:		Country:	
		Postcode:	
Phone:	Home:	Mobile:	Work:
Email:			

Details of current course

Course Name:		Course Code:	
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Select the course(s) you wish to enrol in

Faculty of Hospitality			
<input type="checkbox"/>	SIT30813 Certificate III in Commercial Cookery	<input type="checkbox"/>	SIT31113 Certificate III in Patisserie
<input type="checkbox"/>	SIT40413 Certificate IV in Commercial Cookery	<input type="checkbox"/>	SIT40713 Certificate IV in Patisserie
<input type="checkbox"/>	SIT50313 Diploma of Hospitality	<input type="checkbox"/>	SIT60313 Advanced Diploma of Hospitality
Faculty of Engineering			
<input type="checkbox"/>	MEM30305 Certificate III in Engineering – Fabrication Trade	<input type="checkbox"/>	AUR40212 Certificate IV in Automotive Mechanical Diagnosis
<input type="checkbox"/>	AUR30612 Certificate III in Light Vehicle Mechanical Technology	<input type="checkbox"/>	AUR50212 Diploma of Automotive Technology
<input type="checkbox"/>	AUR30312 Certificate III in Automotive Electrical Technology		
Faculty of Business & Commerce			
<input type="checkbox"/>	BSB40215 Certificate IV in Business	<input type="checkbox"/>	FNS40615 Certificate IV in Accounting
<input type="checkbox"/>	BSB50215 Diploma of Business	<input type="checkbox"/>	FNS50215 Diploma of Accounting
<input type="checkbox"/>	BSB51915 Diploma of Leadership and Management	<input type="checkbox"/>	BSB60215 Advanced Diploma of Business
<input type="checkbox"/>	BSB61015 Advanced Diploma of Leadership and Management		
Faculty of Information & Communications Technology			
<input type="checkbox"/>	ICT40115 Certificate IV in Information Technology	<input type="checkbox"/>	ICT50115 Diploma of Information Technology

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<input type="checkbox"/> ICT40415 Certificate IV in Information Technology Networking	<input type="checkbox"/> ICT50415 Diploma of Information Technology Networking
Faculty of English	
<input type="checkbox"/> 22250VIC Certificate I in EAL (Access)	<input type="checkbox"/> 22251VIC Certificate II in EAL (Access)
<input type="checkbox"/> 22253VIC Certificate III in EAL (Access)	<input type="checkbox"/> 22256VIC Certificate IV in EAL (Access)

Preferred Course Start Date:	
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I _____ declare that I have read EAA student prospectus, marketing material, and received full information from EAA's Education agent (in case of enrolment through education agent) before making the decision to enrol in the course. I agree to abide by the above terms & conditions. The information and documents provided by me are true and correct in all respects.

Students Signature:		Date:	____/____/____
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Completed Application along with supporting documents must be delivered to:

Admissions Officer
Education Access Australia
17-35 Abbotsford Street
West Melbourne
Victoria 3000
Australia

Postal Address
PO Box 876
North Melbourne
Victoria 3051
Australia

Email: admissions@eaa.edu.au

Office Use Only

Approved By	√ or X	Signature	Date
Accounts Department Outstanding fees \$_____	<input type="checkbox"/>		
Application Received by:	<input type="checkbox"/>		
Application Approved by:	<input type="checkbox"/>		