

VARIATION OF REGISTRATION

Students must notify the Registrar about changes to their units/registration by completing this form.

Please refer to the *Varying Your Registration* handout for 2009 dates included in your Registration Pack. This handout is also available from the brochure rack outside the Registrar's Office or upon request.

SURNAME _____ **USED NAME** _____ **ACT #** _____

I am a FEE-HELP student? yes no

I am receiving a Centrelink allowance? yes no

please note: if you are withdrawing from semester one units, please ensure you indicate if you are also withdrawing from semester two units. If you fail to withdraw from your semester two units by the appropriate deadline you may still be liable for fees (including FEE-HELP fees) and a FAIL may be recorded for the unit/s.

SEMESTER ONE				SEMESTER TWO			
code	unit name	ADDED	WITHDRAWN	code	unit name	ADDED	WITHDRAWN
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

REASON FOR VARIATION:

I wish to withdraw my candidature at Ridley Melbourne

I wish to discontinue my candidature with the ACT

student's signature: _____ **date:** ____/____/ 2009

OFFICE USE ONLY	
received (signature): _____	date: ____/____/ 2009
<input type="checkbox"/> accounts ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF <input type="checkbox"/> no change	<input type="checkbox"/> ACT ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF <input type="checkbox"/> not required
<input type="checkbox"/> student ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF	<input type="checkbox"/> tams ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF
<input type="checkbox"/> lecturer ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF	<input type="checkbox"/> RC dbase ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF
<input type="checkbox"/> follow up ____/____ <input type="checkbox"/> KB <input type="checkbox"/> SC <input type="checkbox"/> AF <input type="checkbox"/> not required	