

## International Student COE Extension Request Form

Personal Details:				
First Name(Given name):		Family Name(Surname):		
Date of Birth (dd/mm/yyyy):				
Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Indeterminate <input type="checkbox"/>	
Nationality:		Passport Number:		
Visa Type (Please tick):	Student <input type="checkbox"/>	Tourist <input type="checkbox"/>	Working holiday <input type="checkbox"/>	Other <input type="checkbox"/> Specify:
Visa expiry date:				
Previous CoE details:				
Start and end date of previous CoE:				
Start:		End:		
Course code and name:				
Reason for extension request:				
<input type="checkbox"/>	<b>Academic Progress</b> (Attach an academic progress or intervention strategy letter along with a course or study plan).			
<input type="checkbox"/>	<b>Compassionate and/or Compelling reasons</b> <input type="checkbox"/> <b>Serious illness or injury</b> (attach medical certificate or other relevant medical documents) <input type="checkbox"/> <b>Unusual course structure</b> (attach supporting statement and course or study plan from) <input type="checkbox"/> <b>Bereavement of a family member or another traumatic experience</b> (attach supporting evidence. e.g. death certificate: letter from a counsellor etc.) <input type="checkbox"/> <b>Reduced Study Load (RSL) approved by Enrolments</b> (attach a copy of your RSL approval received from Enrolments) <input type="checkbox"/> <b>Other</b> (please specify and provide supporting documents) _____			
<input type="checkbox"/>	<b>Change of CoE duration due to Credit Transfer</b> (Attach a copy of your Credit Transfer approval letter or Credit Transfer application form).			
<input type="checkbox"/>	<b>Change of Visa Subclass from a Non-Student Visa to a Student Visa</b> (Attach a copy of your current passport, visa label and/or Department of Home Affairs' visa grant letter).			
<input type="checkbox"/>	<b>Other</b> (please specify):			

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Payable Fees	
<b>Change to CoE</b>	\$200 Not applicable where support has been provided to achieve learning outcomes.
<b>Unit re-enrolment fee</b>	\$500.00 (for students who exceed the maximum duration period)
Privacy Statement	
<p>Actors College of Theatre &amp; Television Pty Ltd (ACTT) values your privacy and is committed to handling your personal information in accordance with the Privacy and Data Protection Act 2014 (Vic) and other applicable privacy legislation. The personal information collected on this form will be used primarily for the purpose`s of assessing and processing this application. ACTT may also use and disclose your personal information to verify the information provided by you, to comply with government and other reporting requirements and/or to carry out associated activities connected with this application. Your personal information may also be disclosed to Commonwealth and State agencies such as the Department of Education and Training and the Department of Home Affairs in accordance with ACTT's obligations under the Education Services for Overseas Students Act 2000 (Cth) (<b>ESOS Act</b>), the National Code of Practice for Providers of Education and Training to Overseas Students 2018 (<b>National Code</b>) and other applicable legislation. Your personal information will not otherwise be used or disclosed without your consent, unless permitted by law. By completing and submitting this application, you agree to ACTT collecting, using and disclosing your personal information as described above and in accordance with ACTT's Privacy Policy and Student Information Privacy Collection Statement (which provides further detail about the types of personal information ACTT may collect from you and how it is managed) available on the Privacy page on our website</p> <p>You have a right to access your personal information held by ACTT. If you have any questions regarding privacy, please refer to the Privacy page on our website, or phone us on <b>1300 310 491</b>.</p>	
Student Agreement and Declaration	
<p>In signing this Application Form,</p> <ol style="list-style-type: none"> <li>1. I confirm that the information I have provided in the CoE extension application and all attached supporting documents are true and correct.</li> <li>2. I consent to the collection, use and disclosure of my personal information in accordance with the Privacy Statement above.</li> <li>3. I accept the new CoE on the basis of my current student agreement with ACTT.</li> <li>4. I have attached all supporting documents as required in the CoE extension application.</li> </ol>	
<p>Student Name: _____</p> <p>Student Signature [or electronic acknowledgement]: _____</p> <p>Date: _____</p>	

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<b>Office Use only:</b>	
<p>Has the student completed and submitted the following? <i>(If all the boxes below cannot be ticked, please do not accept the form.)</i></p> <p><input type="checkbox"/> Completed Confirmation of Enrolment Extension Application Form.</p> <p><input type="checkbox"/> Provided all supporting documents.</p> <p><input type="checkbox"/> Completed, signed and dated the Student Agreement section.</p>	
<p>Received by:</p>	
<b>Signature:</b>	<b>Date:</b>