Send the application to:
Brunswick Institute
8 Prowse Street Brunswick
VIC 3056 Australia

Phone: +61 3 98574086
Email: admissions@brunswick.edu.au
Web: www.brunswick.edu.au

AMEND ENROLMENAT FORM

Student details			
Full name		Date of birth	
Student ID No.		Phone number	
Email			
Address			
Amendment request			
☐ Defer enrolment ☐ Suspend enrolment ☐ Cancel enrolment ☐ Withdraw enrolment			
A brief explanation of your reasons for amending your enrolment.			
Student declaration			
I am aware of the consequences of deferring, suspending, cancelling or withdrawing my enrolment. I am also aware that the decision to grant my deferral, suspension, or cancellation of enrolment may affect my student visa. I have read the Defer, Suspend or Cancel an Enrolment Policy & Procedure available on the Brunswick Institute's official website.			
Student signature		Date	
Return the form to the Institute's reception or by email to info@innovative.edu.au.			
Office use only			
Request	☐ Approved ☐ Declined		
Staff signature		Date	