



RULE WAIVER FORM

STUDENT ID

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<u>THIS IS NOT A CHANGE OF ENROLMENT.</u>	
<i>The addition of unit/s after Week 2 will require approval from the Course/Program Convenors.</i>	
PERSONAL DETAILS - PLEASE COMPLETE FORM IN BLACK OR BLUE PEN	
Family Name	Given Names
Course	Student Office
SPECIAL APPROVAL REQUESTED FOR	
<i>I acknowledge that my Student Office must approve this request for it to be considered final.</i>	
Student Signature	Date

OFFICE USE ONLY

1 RULE WAIVER			
If approval is to be granted to waive a rule, please complete the following:			
1. Type of Rule		Unit Rule	Course Rule
2. Description			
3. Reason for Rule Waiver			
Rationale:			
	Enrol in a Unit after the cut-off date		Waive a Pre-requisite Unit
	Recognition of Prior Learning Approved		Other
2 LATE ADDITION OF A UNIT			
If approval is to be granted for the late addition of a unit, please complete the following.			
Unit Title	Unit Code	Available Semester	Credit Points Value
3 ACADEMIC RECOMMENDATION (if applicable)			
Recommended by:		Name:	
		Date:	
<i>Signature of Course/Program Convenor, Academic Director or other delegated authority)</i>			
4 DECISION			
Outcome:		Name:	
APPROVED / DECLINED		Date:	
5. Student notified Yes/No			
<i>(Signature of Course/Program Convenor, Academic Director or other delegated authority)</i>			