Extension of electronic Confirmation of Enrolment (eCoE) Form

This form is to be used by continuing students applying for an extension of an eCoE in an existing course.

Section A: Please fill out your personal details below.

Student ID Number:

Date of Birth:

DD   MM   YYYY

Family Name:

Given Name:

Contact Number:

Please specify your preferred option to collect the eCoE.

I would like to collect in person

Please email it to me

Email Address:

Have you paid applicable fees and charges? Fee payment receipt must be attached with this form.

At which DHM office will you lodge your student visa application? Please indicate below.

City   Dandenong

Course Details

Course Title……………………………………………………………………………………

Reason for extension……………………………………………………………………………

I confirm that I have provided correct information and I have discussed my academic progression with my Course Coordinator and have read and understood the information contained in this form.

Student's Signature _____   Date_____

Section B   Course Progression details (to be completed by Course/Program Coordinator or nominee)

Recommended Intervention Strategy (please indicate below)

Study Skills ☐

Consultation with Lecturer/Tutor ☐

Mentor Program ☐

Library Session ☐

Reduce Study Load ☐

Other (please specify) ☐

…………………………………………………………………………………………………
…………………………………………………………………………………………………
…………………………………………………………………………………………………

Based on the information provided by the student and my academic assessment of the student's progress, he or she is expected to complete their course or program by the end of trimester …………………………………

The information provided below will be used in determining the student's course duration for extension of student visa application. Refer to Standard 9, National Code–Completion within the Expected Duration of Study
http://www.aei.gov.au/AEI/ESOS/NationalCodeExplanatoryGuide/PartD/Standard_9.htm

Unit(s)/course(s) required to study to complete the course/program. Include units from current semester.

Trimester 1	Trimester 2	Trimester 3

_____   _____
Authorised by (name)   Signature

Section C: To be completed by Admissions Officer

Current CoE course end date…….……..…Current Course end date in Bigfoot …….…..…
Revised CoE course end date ……....…Revised course end date in Bigfoot   …….…..…..

Copy to:
- Course/Program Coordinator
- Student
- Student file.