



Elite Education Institute

Undergraduate Change of Major Request Form

CRICOS Code: 03390A

Section A – Student Details

Student Full Name	
Student ID	
Date of Birth	
Email address	
Mobile Number	
Residential Address in Australia	

Section B – Current Course Details

Program Name:	
Major Name:	

Section C – New Course Details

Program Name:	
Major Name:	

Reason for changing Major, please specify:

Section D - Declaration

- I understand that it is my responsibility to ensure that the above information is correct.
- I have sought appropriate academic advice and counselling in relation to my decision.

Student Signature

Date

Office Use only (Department approval)

Approved Disapproved

Comments:

Staff Signature

Date