



Confirmation of Enrolment (CoE) Request

This form is to be completed by international students renewing their student visa, and lodged with Campus Central (see lodgement details below). If approved, a new CoE will be emailed to your student email address.

A new CoE can be issued in very limited circumstances (refer below). To support this CoE request you need to provide written evidence from your doctor or a program director.

You must also:

- Provide a copy of the personal details page in your passport and evidence of your current visa
- Pay in full tuition fees for your previous enrolments
- Enrol in the current year
- Ensure that your Overseas Student Health Cover is valid for the duration of your program
- (Sponsored students) provide approval document from UniSA International Government Sponsorships

Part A: To be completed by student

Student ID:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mr/Miss/Ms/Mrs:	First name(s):							
Family name:								
Date of birth:	Country of birth:							
Passport No:	Current visa expiry date:							
Program code:	Program title:							
Are you a sponsored student?	<input type="checkbox"/> Yes				<input type="checkbox"/> No			
If yes, you must attach approval document from UniSA International Government Sponsorships (Email: international.sponsorship@unisa.edu.au) If not attached, this form cannot be processed.								
Is your Overseas Student Health Cover valid for the duration of your new CoE?	<input type="checkbox"/> Yes				<input type="checkbox"/> No			
If no, complete an OSHC Renewal form and submit it to Campus Central.								
Where will you lodge your visa application?	Country:				City:			
Student Signature:						Date:		

Part B: To be completed by the Program Director OR delegated authority

This CoE Request form must not be approved unless compassionate/compelling circumstances apply. If approved, please complete ALL sections in Part B below.

Study Plan attached. **Note:** This form will not be processed without a study plan.

Total program units:	Units completed:	Anticipated completion date:
Approved credit units:	Remaining units:	

As required by Enrolment Policy A-48, I approve a new CoE for the above student as the following **compassionate/compelling circumstances apply:**

- | | |
|---|--|
| <input type="checkbox"/> medical grounds (medical certificate provided) | <input type="checkbox"/> student took an approved leave of absence |
| <input type="checkbox"/> student failed final course(s) in final study period or failed occasional courses throughout the program | <input type="checkbox"/> prerequisite course(s) not available |
| <input type="checkbox"/> outcome of academic review (eg. reduced study load due to intervention strategy) | <input type="checkbox"/> other (please specify)
_____ |

NB: Compassionate/compelling circumstances do not exist where a student chooses to under-enrol (ie. without approval)

Program Director/Delegated Authority name:	
Signature:	Date:

LODGING YOUR APPLICATION**With Campus Central****In person****City East**

Campus Central
Level 3
Playford Building

Mawson Lakes

Campus Central
Ground Floor
A Building

City West

Campus Central
Ground Floor
Yungondi Building

Mount Gambier

Regional Centre Office
Wireless Road
Mount Gambier SA 5290

Magill

Campus Central
Level 1
B Block

Whyalla

Campus Central
Ground Floor
Main Building

By post

University of South Australia
Campus Central – (name of campus)
GPO Box 2471
Adelaide SA 5000

By fax

City East (08) 8302 2466
City West (08) 8302 0590
Magill (08) 8302 4090
Mawson Lakes (08) 8302 3550
Mount Gambier (08) 8302 6190
& Whyalla

OFFICE USE ONLY**Campus Central**

<input type="checkbox"/> OSHC form sent to LTU (if required)	<input type="checkbox"/> CoE issued and emailed to student
<input type="checkbox"/> Student in BFS	<input type="checkbox"/> Medici updated
<input type="checkbox"/> If student is sponsored, approval document attached. (If not, please contact UI Government Sponsorships: international.sponsorship@unisa.edu.au)	<input type="checkbox"/> Form and attachments placed on student's file
No. of units to complete:	Amount of fees to pay: \$
Date received:	Date processed:
Received by:	Processed by: