Student Request for Concurrent Enrolment Form

SECTION 1 – Student Details

Field	Information
Full Name	
Student ID	
Date of Birth	
Current Course	
CRICOS Code	
CoE Number (Primary)	
Visa Expiry Date	
Contact Number	
Email	

SECTION 2 – Proposed Concurrent Course Details

Field	Information
Proposed Course Name	
CRICOS Code	
Provider Name (if not ALIT)	
Delivery Mode	☐ Face-to-Face ☐ Online ☐ Blended
Proposed Start Date	
Proposed End Date	
Has a CoE been issued?	☐ Yes ☐ No

SECTION 3 – Reason for Request

Please provide a clear academic or career-based reason for enrolling in this course concurrently.

_____

_____

_____

SECTION 4 – Study Load and Timetable Compatibility

Please attach:

- A proposed weekly timetable showing both courses
- Study plan showing how both courses meet the full-time load requirement
- CoE for the secondary course (if already issued)

☐ Attached Timetable
☐ Attached Study Plan
☐ Attached Secondary CoE (if available)

SECTION 5 – Student Declaration

I declare that:

- I understand this request is subject to CRICOS and visa compliance.
- I confirm that my attendance and academic progress will not be negatively affected.
- I understand that if approved, I must maintain satisfactory performance in **both courses**.

Signature: _____ **Date:** _____

SECTION 6 – Office Use Only

Compliance Review

☐ Visa Condition 8202 compliance confirmed
☐ No timetable conflict
☐ CRICOS registered secondary course
☐ Maintains full-time load across both courses
☐ Justification accepted

Approved / Not Approved (circle one)

Primary Course: _____
Secondary Course: _____

Compliance Officer Name: _____
Signature: _____ **Date:** _____

PRISMS Notes Added (if applicable):