

Form checked, scanned, entered by: ECC Staff					
Name: Date:					
Request received:	By student in person				
	By email				

APPLICATION FOR EXEMPTION

OUTCOME/REPLY: will be emailed as soon as possible, subject to the application being correct and complete Submit your application in person or by email: justask@ecc.edu.au



MY DETAILS						
Stud	lent ID:				Date of Birth:	DD / MM / YYYY
Give	n Name(s):	Name(s):			Email Address:	
Fam	ily Name:				Telephone Number:	
ECC	ECC Course:					
l am	I am under 18 years of age: No Yes If yes, please attach written evidence of your parent/guardian approving this request					
			I MEET 1	THESE F	REQUIREMENTS	
By ti	cking these boxe	es below, I de	I MEET 1			
By ti	1		eclare that I meet	t these re	quirements:	oproved English language
	I attach certified translation. I attach certified and other cour	ed copies of ed copies of se materials	eclare that I meet academic transcri unit outlines desc	t these re lipts and/ cribing de must dem	quirements: or qualifications with ap tailed contents of learn	oproved English language ning outcomes, assessments, texts ademic rigour (quality, timeframe,
	I attach certific translation. I attach certific and other cour depth of study Proof of currer length of the comust have bee	ed copies of seed copies of see materials and contentors: Previous ourse for what completed	eclare that I meet academic transcri unit outlines desc s. Such evidence n t) to the relevant s study and/or exp nich I am requesting d no earlier than 3	t these re ripts and/ cribing de must dem ECC unit. perience' ng an exe 3 years pr	quirements: or qualifications with appearance tailed contents of learn onstrate equivalent access date of completion is emption (i.e. exemption)	ing outcomes, assessments, texts



	MY EXEMPTION REQUEST		MY EVIDENCE and ATTACHMENTS			
]	ECC unit name or code:	1	☐ I attach a certified copy of the unit outline			
			☐ Other institute's unit code:			
	ECC unit name or code:		☐ I attach a certified copy of the unit outline			
			☐ Other institute's unit code:			
	ECC unit name or code:		☐ I attach a certified copy of the unit outline			
			☐ Other institute's unit code:			
	ECC unit name or code:		☐ I attach a certified copy of the unit outline			
			Other institute's unit code:			
-						
	MY RESPONSIBILITIES (applies to in	ternational students only)			
By ti	cking these boxes I declare that I understand	my obligations.				
	I realise that the outcome could affect my course duration, which may require a new CoE.					
	I might need to leave Australia, if there is a study gap between courses which is longer than the time allowed by					
	the relevant Australian immigration authorities. It is my responsibility to update the Department of Home Affairs (www.homeaffairs.gov.au), and check how					
Ш	long I can stay in Australia, from my last day of study.					
		<u> </u>				
	MY RESPONSIBILITIES (ap	plies to inte	rnational and local students)			
By ti	cking these boxes I declare that I understand	my obligations.				
	If I do not provide suitable supporting evidence, my application might be deemed incomplete and will not be processed.					
	Applications for exemption applying to the current study period and submitted to ECC after Week 1 of the current study period, will be rejected.					
	I certify that the information submitted with this application is true and correct and I acknowledge that these					
	Any refund entitlement on the current enrolment is based on the date of submission of the form and the					
	evidence.					
	I authorize ECC to check any statements submitted and I acknowledge that if these documents are found to be false or misleading, my enrolment may be cancelled.					
	I have read and understand the following policies (<u>www.edithcowancollege.edu.au/policies</u>):					
	Enrolment Policy Defined Policy					
	 Refunds Policy FEE-HELP Review Procedure (students on FEE-HELP only) 					
	Tuition Fees and Charges Policy					
	Recognition of Prior Learning (RPL) Policy					

MY RIGHTS

If my request is successful and affects my enrolment, I have the right to receive my relevant study reports on original ECC paper and my marks and grades for the current enrolment will be processed as per this table.

Withdrawal Summary						
Diploma	PQP	Enrolment Recorded	Grade on Transcript			
Before e	end of Week 4	No	No			
Week 5 to	end of Week 10	Yes	W = Withdrawn			
From Mon	day of Week 11	Yes	N = Fail			
	Before e Week 5 to		DiplomaPQPEnrolment RecordedBefore end of Week 4NoWeek 5 to end of Week 10YesFrom Monday of Week 11Yes			

Please refer to ECC's Refunds Policy for financial penalties. www.edithcowancollege.edu.au/policies

If my application is unsuccessful, I'm entitled to make an appointment with the Academic Director (or nominee) to discuss the process and rationale for the decision. If appropriate, the Academic Director (or nominee) may seek a reassessment of my case or advise me of the Complains and Appeals Policy (www.edithcowancollege.edu.au/policies).



Further Information is available at:

- Department of Home Affairs Assessment Factors and Simplified Streamlined Visa Processing Framework (SSVF) www.homeaffairs.gov.au
- Overseas Students Ombudsman publications: www.ombudsman.gov.au/about/overseas-students/oso-publications#forstudents
- ECC Policies http://www.edithcowancollege.edu.au/policies

ECC contact details:

and correct.

- ECC Student and Academic Services email: justask@ecc.edu.au
- ECC Student and Academic Services phone: +61 8 6279 1100

I further declare that all the information I have given in this

form and all supporting documents I have provided are true

ECC OFFICE USE ONLY						
ECC Representative Declaration						
I declare that all pertinent informat	tion has been provided to the stud	lent. This form a	and included su	upporting do	cumei	nts have
been checked carefully and certified	d myself before being stamped, so	canned and lodg	ged.			
Special comments for consideration	n:					
SAS Team member signature:			Date:	/	,	1

Signature:

Date:

DD / MM / YYYY