

5. Office use only

Approved Not approved

Comments _____

Signature of Head of School

Print name

____ / ____ / ____
DD MM YYYY

Signature of Assoc. Dean/Faculty Registrar

Print name

____ / ____ / ____
DD MM YYYY

Joint Degrees Only

Signature of Head of School

Print name

____ / ____ / ____
DD MM YYYY

Signature of Assoc. Dean/Faculty Registrar

Print name

____ / ____ / ____
DD MM YYYY

International Students

AusAid Student Yes* No *If yes, send to AusAid Officer, ISC for approval

Signature of AusAid Officer

Print name

____ / ____ / ____
DD MM YYYY

For other international students, copy sent to ISC for noting only.