



Nazarene Theological College

A Member Institution of the Sydney College of Divinity and teaching its Awards

ABN 94 000 125 235 ♦ CRICOS Provider Number 02904K

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COURSE UNIT REQUEST FORM

Please tick one of the following requests:

Absence Approval Extension Withdrawal

Complete the top section of this form and submit complete form to the class lecturer and then to the Academic Dean for approval.

STUDENT NAME: _____ STUDENT NUMBER: _____

COURSE UNIT NAME and CODE: _____

REASON: _____

Medical Certificate attached.

STUDENT'S SIGNATURE: _____ DATE: _____

Office Use Only

CLASS LECTURER / ACADEMIC DEAN

Class Lecturer: Request Supported YES NO

Date work to be finalised: _____

Signed: _____ Date: _____

Academic Dean: Approval Given: YES NO

Signature: _____ Date: _____

REGISTRAR *Please tick items required:*

Advices: Student Lecturer Academic Dean

eMinerva updated FEE-Help

Registration: Part-time/Full-time Card – return requested _____

Signature: _____ Date: _____

BUSINESS MANAGER: *Please charge:*

Change of Enrolment Fee _____

photocopy to business manager