



# VIITE

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## CLASS CHANGE FORM

### Note:

- All class changes (if approved) can only take place at the start of the week.
- You are required to attend your classes according to your current timetable until we have approved your request.

### Student details

Name			
Student ID		Email	

### Class schedule details

VET	Your current class timetable	_____		
	Class timetable you are requesting to change to	_____		
Reason for Request to change class				
Student signature			Date	/ /

### For office use only

Received By			Date	/ /
Approval Granted?	<input type="checkbox"/> Yes	OR	<input type="checkbox"/> No	
	<input type="checkbox"/> Student Notified		<input type="checkbox"/> Student Notified	
	<input type="checkbox"/> Timetable Changed			
Staff Signature			Date	/ /