



EMMANUEL
ANGLICAN
COLLEGE

Learning ~ Living ~ Leading

Change of Subject Request Form

Please return the completed Change of Subject Request form to the Director of Teaching & Learning.

Scanned to PDF and emailed to: lboyd@eac.nsw.edu.au

OR directly handed to: Lee Boyd
Director of Teaching & Learning

Student Name:

Year: 12 11 10 9

(tick one)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Please list all courses you currently undertake as part of your pattern of study:

Have you previously changed a subject within this Stage, or have you moved from another school and not been able to continue a subject?:

Name of course you wish to withdraw from:

Teacher's Signature:

Name of course you wish to move to:

Teacher's Signature:

Reason for Change:

Student's Signature:

Date:

Parent's Signature:

Date:

Careers Advisor's comment: (Stage 6 only)

Signature:

Date:

Office Use Only:

Received: _____ (date) Recommendation: Approved Declined

Edval & TASS timetables updated: _____ (date)

NESA records updated: _____ (date)

Director of Teaching & Learning _____
(signature) (date)