



WELLPARK
COLLEGE OF NATURAL THERAPIES

Wellpark College of Natural Therapies

14 Mills Lane, Albany, Auckland 0632

PO Box 301320, Albany, Auckland 0752

Phone: +64 (9) 360 0560

reception@wellpark.co.nz

APPLICATION TO CHANGE ENROLMENT ON PROGRAMME STATUS **OPTION C: CHANGE OF PROGRAMME**

Option C: Change of programme

Please forward the completed Form(s) to Faculty Support. Your application will be considered by the Education Sub-committee (ESC). Approval is not guaranteed.

Please note: Students are not permitted to enrol in more than one programme of study at a time. Wellpark College will give priority to students wishing to undergo a full-time programme of studies. All students who enroll in a programme at Wellpark College of Natural Therapies (studying full time or part-time) are required to complete the qualification within the timeframes stated on the Wellpark College website.

The Application to change from Full-time to Part-time or on and off campus requires a separate Application Form.

Fees: A non-refundable administrative fee of \$75 must be paid before your application to change.

Once the application is approved and processed, your student status will change on Moodle, please ensure that you download and keep any documents from Moodle BEFORE returning this Form. Speak to the Librarian if you have any concerns. All programmes must still be completed within required time frames.

The change to enrolment status may mean your attendance is monitored differently, and you are required to read the Student Handbook to find out how.

The change to enrolment status may affect your Student Loan. You are required to advise Studylink of any change to enrolment status.

Transfer of fees between programmes is NOT possible.

NO refunds will be given on any courses enrolled in (even those which have not yet begun) after day 8 of the commencement of your Programme.

All Sections of this form must be completed before processing.

OPTION C:

CHANGE TO PROGRAMME ENROLMENT STATUS

Complete all sections of the Form.

Transfer of fees between programmes is NOT possible. The change to Programme may affect your Student Loan.

STUDENT NAME: STUDENT ID:

NAME OF QUALIFICATION CURRENTLY STUDYING: PT On-Campus
..... FT Off-Campus

DATE I ENROLLED:/...../.....

NAME OF QUALIFICATION I WISH TO CHANGE ITO: PT On-Campus
..... FT Off-Campus

DATE I WILL RECOMMENCE THIS NEW ENROLMENT:/...../.....

SIGNATURE:

What are your reasons for changing?

- Change in personal circumstances (financial, family...)
- Change in my goals and connection to the study pathway

Please attach or provide other details as appropriate:

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What College Support or other services did you utilise before finalising your decision to Change Programme Enrolment Status.

- Counselling session at the Prema Clinic
- Free Academic Clinics
- Meeting with Faculty Support
- Meeting with Programme Leader
- Research Day or Journal Club?
- Librarian support

Student: Please provide details as appropriate:

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PROGRAMME LEADER TO COMPLETE

Programme Leader meeting date Programme Leader approval Y / N

Comments

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.....

Education Subcommittee meeting date Education subcommittee approval Y / N

Comments

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Management requires this Form to be approved prior to a change from Full time to Part-time

Manager Signature is required before going to Education Subcommittee

Manager Signature

Date

Education Subcommittee meeting date **Education subcommittee approval** Y / N

Comments

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ESC Chair name and signature

ADMINISTRATION USE ONLY

Faculty Support (FS) and Accounts Administrator (AA) complete the following tasks and date and initial beside each task when completed.

- FS Notify Enrolment Advisor (initial.....) (date.....)
- FS Notify relevant tutors (initial.....) (date.....)
- FS Notify the student of the outcome and follow up-processes (initial.....) (date.....)
- FS notify Accounts administrator to generate Invoice (amount.....) (initial.....) (date.....)
- AA Accounts administrator to notify Faculty Support on Payment of Fee
- AA to advise management about Fulltime to Part-time status adjustment (Deferral)
- FS Change student details on student file (SMS) correctly (initial.....) (date.....)
- FS Upload this Form to the student's file on the SMS (initial.....) (date.....)
- FS Ask the Librarian to change the students Moodle status for relevant courses (initial.....) (date.....)

Faculty Support name: Signature:

Accounts administrator name: Signature: