



APPLICATION FOR REVERSAL OF ADVANCED STANDING/PRECLUSION

*Please read **Conditions** on the bottom half of this form*

PLEASE PRINT CLEARLY

Form: SSC-137/02/10

STUDENT NUMBER									
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SURNAME/FAMILY NAME (Block Letters)	GIVEN NAME/S (Block Letters)

COURSE TITLE:			
COURSE CODE			
<i>What is your current credit point total on SIMO including your currently enrolled units:</i> (eg:360)		<i>Are you an International Full-fee paying student?</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Advanced Standing Unit / Preclusion Requested for Reversal	Unit Title of Advanced Standing Unit Requested for Reversal	Reason for Reversal
<i>Eg: ACC1100 or Level One Elective</i>	<i>Accounting I</i>	
<i>Eg: MSM3121 for MSM3102</i>		

CONDITIONS:
<ul style="list-style-type: none"> Requests for reversal must be no later than week 3 of your final semester. Advanced Standing cannot be re-instated after reversal and failure of the unit. Reversal of Advanced Standing cannot be processed if your course status is 'Completed'. International students are signing for a reversal of the Advanced Standing as well as any course length increase, as shown below*. An increase may require confirmation of enrolment (COE) amendment. <p><i>*This reversal of Advanced Standing will lead to a <u>TOTAL</u> course length increase of:</i></p> <p> <input type="checkbox"/> 0 Semester <input type="checkbox"/> 1 Semester <input type="checkbox"/> ____ Semesters </p>

Declaration:
I have read and fully understand the conditions of reversing my advanced standing as listed above.

Student Signature:		Date:	
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FACULTY APPROVED <input type="checkbox"/> / NOT APPROVED <input type="checkbox"/>

Staff Name (please print):		Date:	
Staff Signature:		Date:	