

Application for Reduced Study Load

Conditions to apply:

- ✓ You are Coursework International student visa holder
- ✓ You must enrol in full-time study load (where possible) until you receive a response
 to your application
- ✓ All applications must include supporting documentation. Refer to the <u>website</u> for required documentation
- ✓ Additional supporting documentation is required for below courses:
 - Sponsored Students confirmation from sponsor to support your request to reduce your study load
 - UG Nursing approval and recommended enrolment plan from Course Director. Students to email ugnursingadmin@uts.edu.au for faculty approval.
 - Master of Advanced/Health Services Management approval from faculty required. Students to email Health.academic.programs@uts.edu.au
 - Master of Laws approval from Director of Students. Students to Email: Karen.Lee@uts.edu.au
 - Graduate School of Health approval from Faculty. Students to email gshadmin@uts.edu.au
- ✓ Submit your completed application via My Student Portal
 - Select ASK UTS, then select Enquiry Category and Submit a Form
- ✓ The outcome can take up to 2 weeks and will be communicated via your application in My Student Portal. Check regularly during the 2 week period.

^{*}Complete all fields on this form

The Teaching	Session You a	re Applying For	
Year	YYYY	Teaching Session	Choose a session

Enrolment Details	
How many credit points do you want to enrol in this session?	

Student Details	
UTS Student ID Number	
Family Name(s)	
Given Name(s)	
Visa Expiry	DD/MM/YYYY
Sponsored Student	Choose an option

Course Details	
Course Code	С
Course Name	



Reason for Applying You can refer to the <u>UTS website</u> for more information.				
Select a re	eason	Choose a reason		
		or applying for reduced stud	y load below.	
*Proposed	study plan to ensure	you are on track to comple	te by CoE end date.	
Propose	d Study Plan			
		ete vour remaining subjects	by filling out the study plan	
table below	w. Please refer to the	e UTS Handbook to underst	by illing out the study plan	
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Subject			
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Year	YYYY		
	Autumn	Spring	Summer (optional)
Subject			
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Subject			

Declaration

I, Click here to enter your NAME, as of DD/MM/YYYY, confirm that all provided information is correct and that this information may be provided to the Australian Government or other external bodies only for the purpose of demonstrating compliance with the ESOS Act or other purposes as required by law.