

A request to change the teacher/enrolling person will incur a fee of \$59 per candidate. The enrolling person cannot be changed retrospectively (once the exam has taken place).

Please return the completed form by email only.

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## CURRENT ENROLLER DETAILS

I, ....., (enroller number.....)

request that all further correspondence for the current exam/s for the below candidate/s be forwarded to the new enrolling person.

Signature: ..... Date: .....

This change of teacher/enroller is applicable to the following candidates:

Candidate name	Candidate number	Subject	Grade

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## NEW ENROLLER DETAILS

Enroller name: ..... Enroller number:.....

Address: .....

Suburb: ..... Postcode:.....

Phone/mobile: .....

Email: .....

I agree to administer this enrolment and abide by the regulations in the Manual of syllabuses and the policies on the AMEB (NSW) website. I certify that I am at least 18 years of age.

Signature: ..... Date: .....

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## PAYMENT DETAILS

I authorise AMEB (NSW) to charge my credit card for \$59 per candidate, being \$.....

Mastercard / VISA (please circle)

Name on card: ..... Signature: .....

Card number: | | | | CVN: ..... Expiry date: \_\_\_\_ / \_\_\_\_