amebnsw

Change of Teacher/Enrolling Person

A request to change the teacher/enrolling person will incur a fee of $55 per candidate.

Please return the completed form by post or email.

CURRENT TEACHER / ENROLLER DETAILS

I ..... Teacher/Enroller Number:.....

request that all further correspondence relating to examinations for the ..... series be forwarded to the new teacher/ enrolling person.

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

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

Candidate Name	Candidate Number	Subject	Grade

NEW TEACHER / ENROLLER DETAILS

Teacher/Enroller Name: ..... Teacher/Enroller Number:.....

Address: .....

Suburb: ..... Postccode:.....

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: .....

PAYMENT DETAILS *(Please note requests WILL NOT be processed without the accompanying fee)*

I authorise AMEB (NSW) to charge my credit card for $55.00 per candidate, being $..... (plus 0.4% merchant interchange fee)

Master Card / VISA (Please Circle)

Name on Card: ..... Signature: .....

Card Number: |___|___|___|___| |___|___|___|___| |___|___|___|___| |___|___|___|___| Expiry date: ___ ___ /___ ___