

Student Contact Details Change Form

Student Name:	
Date of Birth:Student ID:	
Course Name:	
New Contact Details:	
Address :	
Telephone:	
Email:	
Emergency Contact Details:	
Name:	
Address:	
Telephone:Mobile:Mobile:	
Email:	
Relationship to You:	
Privacy Statement	
Personal information is collected solely for the purpose of operating as a Registered Training Organisati the VET Quality Framework administered by the Australian Skills Quality Authority who are the reauthority The requirements of the registering authority may mean the release of your personal inform the purposes of audit, or for collection of data by Commonwealth and State Government departm agencies. It is a requirement of the VET Quality Framework that students can access personal information the Institute and may request corrections to information that is incorrect or out of date. Please student administration if you wish to view your own records.	egistering nation for nents and ntion held
Student Signature	