

## **Change of Personal Details**

Term 3	3 2018
Studer	nt Number:
Studer	nt Name:
Course	9:
Please	e select relevant option(s) and sign:
	Change of Name (please attach certified copy of certificate/written evidence of name change)
	Previous Name:
	New Name:  Change of Passport/Visa Number or Type (please present passport to Reception)
	New Passport Number:
	New Visa Number:
	New Visa Type & Subclass (e.g. Student 572): Change of Postal Address
	New address (including postcode):
	Change of Contact Telephone Number(s)
	New home phone number:
	New mobile phone number: Change of Email Address
	New email address:
□ Please	Change of Emergency Contact e nominate the person(s) who should be contacted in case of emergency.
Name(	(s):
Relatio	onship to you: Telephone number:
Nothin	ng has changed over the last 3 months
Studer	nt Signature:
Б.	