

| Form No: | CF-002 |
|------------|---------------------------------|
| Form Name: | Student information update form |
| | |

AREA OF SERVICE- STUDENT INFORMATION UPDATE FORM

WHERE A STUDENT CONTACT DETAILS CHANGE WHILE STUDYING WITH THE SIT, THE STUDENT MUST ADVISE SIT OF THESE CHANGES WITHIN 5 WORKING DAYS. THESE DETAILS INCLUDE BUT ARE NOT LIMITED TO DETAILS SUCH AS ADDRESS AND CONTACT PHONE DETAILS.

| Student ID: | Name: | |
|-------------|-------|--|

Mark 'X' in the changed column for the updated information.

| Changed | Contact Mode | Contact Details | | | |
|---------|-------------------------------------|--|--|--|--|
| Х | Mobile Number: | | | | |
| Х | Home Phone Number: | | | | |
| X | Email address: | | | | |
| Х | Home Address: | | | | |
| Х | Preferred Mode of contact: | Home X Mobile X phone X Email X any of them | | | |
| X | Relative or Friend in Australia: | | | | |
| X | Contact Overseas: | | | | |

| Approved by: Compliance and Quality Department | Effective Date: 01/11/2016 | |
|---|----------------------------|--|
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|--|--|------|---|---|--|--|
| Declaration, | | | | | | |
| I declare that the information supplied on this form is correct and complete. | | | | | | |
| I acknowledge that the provision of incorrect information or the withholding of relevant information may affect my enrolment at RTO. | | | | | | |
| Signature | | Date | / | 1 | | |

| Office Use Only | | | | | | | |
|---|-------|-------------|-------|---|---|---|--|
| Received by Administration | Name: | | Date: | | / | / | |
| Administration Executive Signature | | | Date: | | / | / | |
| Action Required | | Actioned By | Date | | | | |
| -Database updated | | | | / | / | | |
| -All documents filed in student folder – Administration Department | | | | / | 1 | | |

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