

## CHANGE TO PERSONAL INFORMATION

*Make changes to any item where your personal information has changed since your last completed an enrolment form.*

**Student ID Number:** .....

### OFFICE STAFF USE ONLY

Entry Date: \_\_\_/\_\_\_/\_\_\_

Initials: \_\_\_\_\_

Change of details taken by phone

### Student Details

Surname: \_\_\_\_\_ First given name: \_\_\_\_\_

Other given names: \_\_\_\_\_ Preferred given name: \_\_\_\_\_

Title (Mr, Mrs, Ms, Miss, Dr, other): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender:  Male  Female

Telephone (H): \_\_\_\_\_ Telephone (W): \_\_\_\_\_

Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

### Student Residential Address

Number and Street: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

*Postal Address (if different from above)*

Number and Street: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Country: \_\_\_\_\_

### Changes to Emergency Contact Details

Surname: \_\_\_\_\_ Given name: \_\_\_\_\_

Telephone (H): \_\_\_\_\_ Telephone (W): \_\_\_\_\_

Mobile: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

## Employer Details

### Employer Contact Details for Apprentices, Trainees and School-based Trainees Only

Business name: \_\_\_\_\_

Contact name: \_\_\_\_\_

Number and Street: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone (W): \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**OFFICE USE ONLY - Employer Code:** \_\_\_\_\_

## Employment Status

Which best describes your current employment status? *(Tick one box only)*

- Full-time employee     Part-time employee     Self-employed – not employing others     Employer  
 Employed – unpaid worker in a family business     Unemployed – seeking full-time work  
 Unemployed – seeking part-time work     Not employed – not seeking work

## Declaration

I certify that all details provided on these forms are correct.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_