Student Change of Contact Details Form



• If any of your contact details change, please update the new details next to it in the space provided.								
 It is mandatory to update any change of your contact details to the college within the 7 days of change. 								
Confidentiality Clause:								
The RTO upholds the Commonwealth Privacy Act. You can be certain that all your personal details will remain confidential uploss you specify otherwise. Information recorded on this form may not								
will remain confidential unless you specify otherwise. Information recorded on this form may not be released to external bodies in accordance with PAX Institute's policy.								
Student Name		170(115)		· y •				
Date of Birth		Student ID						
	NEW ADD	DRESS						
(Please note, all correspondence will be sent to this address & email id)								
Number and Street								
Suburb/Town								
State		P	Postcode					
Telephone		M	Mobile					
Email Address								
Emergency Contact Details (Please note that this person will be contacted if we fail to make contact with you)								
Contact Name								
Number and Street								
Suburb/Town								
State		P	ostcode					
Telephone		N	obile					
Email Address								
Student's Signature	Date:							
For office use only								
Updated on WISENET	Staff Name:	Updated	on PRISMS	Sta	ff Name:			

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