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National RTO No: 90381 ABN: 47 568 269 236

Request for Amendment to Personal Information Form

Appli	cant's details:					
	Name:					
	Date of birth:					
	Address:					
	Di					
	Phone:					
Reason for requesting amendment to personal information:						
	Incorrect spellin	g on College records		Change of name	☐ Marriage	
	Change of rank	ange of rank or title – Please specify:				
	Other - Please specify:					
Comments:						
Identification (ID) required: Your request cannot be processed until certified documentary evidence is provided. Documentary evidence must be in the form of a certified copy bearing the signature of a Justice of the Peace attached to this form. Alternatively the original document can be brought into the College to be certified. If you are applying for a correction to date of birth, minor name change, including addition of a middle name, a spelling correction or a change of name order, evidence can be a: • Birth Certificate or • Australian Drivers Licence or • Change of Name Certificate or • Australia Photo ID Card. • Passport or If you are applying for a full name change after legally changing your name, evidence must be a: • Primary form of photographic ID reflecting new name and • Primary form of photographic ID reflecting old name e.g. passport. If you require a name change after marriage or divorce, evidence must be a: • Marriage /Divorce Certificate. If you are applying for a correction or change of gender record, evidence must be either a: • Passport or • Birth Certificate.						
Declaration: certify that all information on this form is correct including any attached supporting documentation and certificates. Applicant's signature:						
Student USI No. (if a student) Note: application forms not signed will not be accepted.						
Office use only:						
	<u> </u>	e only)		Date: (Office use only)		
		th the applicant's records.				