# Student Personal Details Form

**Information contained in this document is utilised in accordance with National Training College of Australia Privacy Policy**

Please complete the following form in full and return.
If you have any questions, please contact the Student Support Officer

## Section 1 – Student Details

| Title: | ☐ Mr. | ☐ Mrs. | ☐ Ms. | ☐ Miss | ☐ Other: |
|---|---|---|---|---|---|
| **Surname:** | | | | | |
| **Given Names:** | | | | | |
| **Gender:** | ☐ Male | ☐ Female | **Date of Birth:** | /      / | |
| **Student USI** | | | **Student Number** | | |
| **Qualification/s enrolled** | 1)<br>2)<br>3) | | | **Year of commencement** | |

## Section 2 – Contact Details

**Personal Contacts**

| Phone: (Home) | | Mobile: | |
|---|---|---|---|
| Email: | | | |

| **Home Address**: | | | | | |
|---|---|---|---|---|---|
| Suburb: | | State: | | Postcode: | |

| **Mailing Address:** | | | | | |
|---|---|---|---|---|---|
| Suburb: | | State: | | Postcode: | |

**Emergency Contact:**

| Name: | | Relationship: | |
|---|---|---|---|
| Contact Tel: | | Mobile No: | |
| Home address | | PO Box | |
| Email address | | | |

## Section 3 – Position / Job role

| **Position Title:** | |
|---|---|
| **Industry** | |

I declare that the information provided is true and correct.  I am also aware that should any of my contact details change I am to advise SSO within seven (7) days.  I am also aware that for every six months at National Training College of Australia I am required to have a interview with SSO to confirm all information is correct.

| **Signature:** | | **Date:** | /      / |
|---|---|---|---|

## Student Support Officer Use Only

| **Student information in Student Management System is correct:** | ☐ Yes  ☐ No | **Date:** | /      / | **Initial:** | |
|---|---|---|---|---|---|

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