

# Change of Contact Details



Please complete all sections, and submit completed form to student services. Have you existing contact details changed?

- NO.** Please complete Personal Details and Course Details section     **YES.** Please complete all sections below

## Personal Details

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Other: _____
Given Name:	Student ID Number				
Surname:	Date of Birth:				
Email:	Contact Number				
Current Address:					

## Course Details

Course Code:	Course Name:
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## New Address and Contact Details

Email:	Contact Number
Address:	

## Emergency Contact Details

Title:	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Other: _____
Given Name:	Relationship				
Surname:	Date of Birth:				
Email:	Contact Number				
Address:					

## Student Declaration

**PRIVACY STATEMENT:** The information you provide on this form is bound by the I.G Institute "Privacy of Information" Policy. This information is collected and held by the I.G Institute for administrative purposes and activities associated with your enrolment. I.G Institute will not disclose your personal information without your consent and without due cause, except as required by law, Government regulations or for the normal operational activities of the College.

I agree that:

- I have informed Trade Training College within 7 days of me changing my personal details.  
 I have read and understood and agree to the Privacy statement.

Signature:

Date