



CHANGE OF INFORMATION FORM

Your Surname: _____ Your First Name: _____

New Details to be Amended:

Home Address: _____

Postal Address: _____

Home _____ Mobile _____ Work _____ Email _____

Please list ALL people who this will apply to (eg. students, spouse etc):

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Surname: _____ First Name: _____ Relationship to you: _____

Is this a result of a change to family circumstances? Yes No

Is there any court papers associated with this change? ie. Parenting Plan, AVO, etc Yes No

Is there a copy attached? Yes No

Is there any other information you would like to provide to the College?

Signed: _____ Dated: _____

Office Use Only

Forwarded To: SS Finance DS PA/Enrolments LS GO Via: Email Hard Copy

Filed By: _____ Date: _____ Signature: _____