

Change of Personal and/or Contact Details

| Section A- Student Details | | | |
|--|--|-----------------|--|
| Student Name: | | D.O. B | |
| Student Id: | | Email: | |
| Contact Number: | | Date: | |
| Course enrolled in: | | | |
| Address: | | | |
| | | | |
| Section B - Student's new Details <i>(Please attached supporting documents if required)</i> | | | |
| Current/ Changed to Address: | | | |
| State: | | Post Code: | |
| New email id: | | New contact No: | |
| Please return this completed form to the college. If sending by email, please send to info@ibm.vic.edu.au | | | |
| Section C - Declaration | | | |
| Student name & Signature: | | Date: | |
| Please return this completed form to the college. If sending by email, please send to info@ibm.vic.edu.au | | | |
| Office Use Only | | | |
| Request: | <input type="checkbox"/> Changed in SMS <input type="checkbox"/> Changed in Prism <input type="checkbox"/> Changed in all excel sheets | | |
| Institute's Staff Signature: | | Date: | |
| Comments: | | | |
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